

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 28, 2002 8:00 am
Secretary of State

04-28-2002 90777 047 ***150.00

DOCUMENT #

1. Entity Name

GEMMAC INC

F13054 ✓

DO NOT WRITE IN THIS SPACE

641853

2. Principal Place of Business

2401 STANFORD RD

3. Mailing Address

2401 STANFORD RD

Suite, Apt. #, etc.

702

Suite, Apt. #, etc.

702

City & State

PANAMA CITY FL

City & State

PANAMA CITY FL

Zip

32405

Country

USA

Zip

32405

Country

USA

4. FEI Number

59-2062821

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name JERRY MCCLUNG

Street Address (P.O. Box Number is Not Acceptable)

2401 STANFORD RD # 702

City

PANAMA CITY

FL

Zip Code

32405

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Jerry McClung

Signature, typed or printed name of registered agent and title if applicable.

Jerry McClung Pres

(NOTE: Registered agent signature required when reinstating)

4/16/02

DATE

**9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.**
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

**10. Election Campaign Financing
Trust Fund Contribution.** ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE PRESIDENT
NAME JERRY MCCLUNG
STREET ADDRESS 2401 STANFORD RD # 702
CITY-ST-ZIP PANAMA CITY FL 32405

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CR2E034B (12/01)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jerry McClung

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jerry McClung

4/16/02

Date

850-785-6839

Daytime Phone #