

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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FILED

03 JAN 29 PM 12:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



☐ CHECK HERE IF MAKING CHANGES

DOCUMENT # F93000005764

1. Entity Name
GP BAYHEAD CORP.



Principal Place of Business
SUITE 300
280 DAINES STREET
BIRMINGHAM MI 48009

Mailing Address
SUITE 300
280 DAINES STREET
BIRMINGHAM MI 48009

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 38-3152186

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RINES, MILTON
15235 S TAMiami TRAIL
FT MYERS FL 33908

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME ZLOTOFF, PAUL M
STREET ADDRESS 280 DAINES STREET, SUITE 300
CITY-ST-ZIP BIRMINGHAM MI 48009 ☐ Delete

TITLE
NAME 300011186398
STREET ADDRESS 01/29/03--01065--025 **291.25
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VS
NAME SOBERMAN, CHARLES A
STREET ADDRESS 280 DAINES #300
CITY-ST-ZIP BIRMINGHAM MI 48009 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME WEISS, ARTHUR
STREET ADDRESS 280 DAINES STREET SUITE 300
CITY-ST-ZIP BIRMINGHAM MI ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VT
NAME KOSTER, GLORIA A
STREET ADDRESS 280 DAINES STREET, SUITE 300
CITY-ST-ZIP BIRMINGHAM MI ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

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TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(248) 645-7220

CR2E034 (10/02)