

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000000921

1. Entity Name

THE TRC GP, INC.

**FILED**  
**Apr 21, 2000 8:00 am**  
**Secretary of State**

04-21-2000 90048 022 \*\*\*150.00

Principal Place of Business

Mailing Address

101 SE 2ND PLACE, SUITE 202  
GAINESVILLE FL 32601

101 SE 2ND PLACE, SUITE 202  
GAINESVILLE FL 32601-6592

2. Principal Place of Business

104 N Main St., Suite 300

Suite, Apt. #, etc.

3. Mailing Address

104 N Main St., Suite 300

Suite, Apt. #, etc.

City & State  
Gainesville, FL

City & State  
Gainesville, FL

4. FEI Number

76-0547315

Applied For

Not Applicable

Zip  
32601

Country  
US

Zip  
32601

Country  
US

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

THOMPSON, C. FREDRICK  
104 N. MAIN ST  
STE 300  
GAINESVILLE FL 32601

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.

SIGNATURE

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

C. Frederick Thompson  
President

(NOTE: Registered Agent signature required when reinstating)

DATE

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

☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Delete  
NAME MCGURN, KENNETH R  
STREET ADDRESS 101 SE 2ND PLACE, SUITE 202  
CITY-ST-ZIP GAINESVILLE FL 32601

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

TITLE PD ☐ Delete  
NAME THOMPSON, C. FREDERICK  
STREET ADDRESS 104 N. MAIN ST, SUITE 300  
CITY-ST-ZIP GAINESVILLE FL 32601

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

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

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

SIGNATURE:

C. Frederick Thompson, President

04/10/2000

352-378-4814

Date

Daytime Phone #

CR2E034 (9/99)