

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # F99000006541**1. Entity Name
GILMORE BROTHERS, INC.**FILED**
Feb 29, 2000 8:00 am
Secretary of State

02-29-2000 90131 028 ***150.00

Principal Place of Business

**143 S. BURDICK ST.
KALAMAZOO MI 49007**

Mailing Address

**143 S. BURDICK ST.
KALAMAZOO MI 49007**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **38-0579100**Applied For
Not Applicable5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required**A0021573**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

7. Name and Address of New Registered Agent

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

(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 State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME ☐ Delete
PHILLIPS, STEPHEN
STREET ADDRESS
143 S. BURDICK ST.
CITY-ST-ZIP
KALAMAZOO MI 49007TITLE NAME ☐ Delete
BREYFOGLE, KATHY
STREET ADDRESS
143 S. BURDICK ST.
CITY-ST-ZIP
KALAMAZOO MI 49007TITLE NAME ☐ Delete
PHILLIPS, BRYANT
STREET ADDRESS
143 S. BURDICK ST.
CITY-ST-ZIP
KALAMAZOO MI 49007TITLE NAME ☐ Delete
BOUDEMAN, SHERWOOD M
STREET ADDRESS
229 E. MICHIGAN SUITE 230
CITY-ST-ZIP
KALAMAZOO MI 49007TITLE NAME ☐ Delete
DAWE, SHIRLEY ANN
STREET ADDRESS
119 CRESCENT ROAD
CITY-ST-ZIP
TORONTO ONTARIO CANADATITLE NAME ☐ Delete
PARFET, MARTHA
STREET ADDRESS
5228 SHEFFIELD ROAD
CITY-ST-ZIP
HICKORY CORNERS MI 49060

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☐ Change ☒ Addition
DIRECTOR
WILLIAM PARFET
STREET ADDRESS
5444 N. MAIN ST.
CITY-ST-ZIP
MATTAWAN, MI 49071TITLE NAME ☐ Change ☒ Addition
DIRECTOR
RAY T. PARFET JR
STREET ADDRESS
5228 SHEFFIELD RD
CITY-ST-ZIP
HICKORY CORNERS, MI 49060TITLE NAME ☐ Change ☐ AdditionTITLE NAME ☐ Change ☐ AdditionTITLE NAME ☐ Change ☐ AdditionTITLE NAME ☐ Change ☐ Addition

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:

KATHY BREYFOGLE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**2-4-00**

Date

616 373-2540

Daytime Phone #