

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 26, 2001 8:00 am
Secretary of State

01-26-2001 90144 047 ***150.00

DOCUMENT # F99000006642

1. Entity Name
GPT GLENDALE, INC.

Principal Place of Business 5300 REGION COURT LAKELAND FL 33815	Mailing Address 5300 REGION COURT LAKELAND FL 33815
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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4. FEI Number 59-3617301	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
State 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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, 2001 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	C <input type="checkbox"/> Delete
NAME	MEILLAT, HERVE
STREET ADDRESS	2ND AND WASHINGTON STREETS
CITY-ST-ZIP	READING PA 19601
TITLE	VST <input checked="" type="checkbox"/> Delete
NAME	SMITH, JERRY
STREET ADDRESS	2ND AND WASHINGTON STREETS
CITY-ST-ZIP	READING PA 19601
TITLE	D <input type="checkbox"/> Delete
NAME	PELLEGRINI, RICHARD
STREET ADDRESS	5300 REGION COURT
CITY-ST-ZIP	LAKELAND FL 33815
TITLE	D <input checked="" type="checkbox"/> Delete
NAME	GEHRING, ROGER
STREET ADDRESS	2ND AND WASHINGTON STREETS
CITY-ST-ZIP	READING PA 19601
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	Sec <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Chaknos, William
STREET ADDRESS	2nd and Washington Streets
CITY-ST-ZIP	Reading, PA 19601
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Fogelman, Rodney
STREET ADDRESS	2nd and Washington Streets
CITY-ST-ZIP	Reading, PA 19601
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	deLa Morandier, Brice
STREET ADDRESS	2nd and Washington Streets
CITY-ST-ZIP	Reading, PA 19601
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Balleyguier, Claude-Henri
STREET ADDRESS	2nd and Washington Streets
CITY-ST-ZIP	Reading, PA 19601

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: William G. Chaknos DATE: 1/18/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)