

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G11788

1. Entity Name

G. S. ANDERSON, INVESTMENTS, INC.

FILED
Feb 04, 2000 8:00 am
Secretary of State

02-04-2000 90002 040 ***150.00

Principal Place of Business

C/O GARY S ANDERSON
6024 14TH STREET WEST
BRADENTON FL 34207-4104

Mailing Address

GS ANDERSON INV. INC.
9231 67th Ave East
Bradenton FL 34202

GS ANDERSON INV. INC.
9231 67th Ave East
Bradenton FL 34202



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

9231 67TH AVE EAST
Suite, Apt. #, etc.

Suite, Apt. #, etc.

City/State

City & State

BRADENTON

FL

Zip

Country

Zip

Country

34202 USA

34202

4. FEI Number

59-2249914

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

ANDERSON, GARY S
6024 14TH STREET WEST
BRADENTON FL 34207

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)

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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.

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\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
ANDERSON, GARY S
6024 14TH STREET WEST
BRADENTON, FL 00000

☐ Delete

NEW

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

GS ANDERSON INV. INC
9231 67th Ave East
Bradenton FL 34202

☐ Change

☐ Addition

TITLE
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CITY-ST-ZIP

☐ 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:

(Signature and typed or printed name of signing officer or director)

Date

Daytime Phone #

1-27-2000 941-758-0000

CR2E034 (9/99)