

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **G43571**

1. Entity Name

MARILYN'S GIFT GALLERY, INC.

FILED
Jan 29, 2000 8:00 am
Secretary of State

01-29-2000 90093 042 ***150.00

Principal Place of Business

**127 FEATHER EDGE LOOP
LAKE MARY FL 32746**

Mailing Address

**127 FEATHER EDGE LOOP
LAKE MARY FL 32746-2547**

905509



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

115 Ruby Red Lane
Suite, Apt. #, etc.

3. Mailing Address

8678 H SW 95th St
Suite, Apt. #, etc.

City & State

Longwood, FL

City & State

Ocala FL

4. FEI Number

59-2297407

Applied For

Not Applicable

Zip

32750

Country

Seminole

Zip

34481

Country

Marion

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

WILENSKY, MARILYN

**127 FEATHER EDGE LOOP
LAKE MARY FL 32746**

Name

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

Same

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 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
NAME
STREET ADDRESS
CITY-ST-ZIP
**PT
WILENSKY, MARILYN
127 FEATHER EDGE LOOP
LAKE MARY FL**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PT
MARILYN WILENSKY
8678 H SW 95th St
Ocala, FL 34481**

☒ Change ☐ Addition
Address only

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
WILENSKY, MICHAEL
115 RUBY RED LANE
LONGWOOD FL**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
#

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
WILENSKY, ELLIS
127 FEATHER EDGE LOOP
LAKE MARY FL**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
Ellis Wilensky
8678 H SW 95th St
Ocala, FL 34481**

☒ Change ☐ Addition
Address only

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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☐ 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: **Marilyn Wilensky**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/18/00
Date
354-291-2060
Daytime Phone #

CR2E034 (9/99)