

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # H64596

1. Entity Name
G P CONSTRUCTION CO. OF OCALA, INC.



Principal Place of Business
**3681 S.W. 52ND TERRACE
OCALA FL 34474
US**

Mailing Address
**3681 S.W. 52ND TERRACE
OCALA FL 34478
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2549190**

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

**GAYLORD, RONALD G.
3681 S.W. 52ND TERRACE
OCALA FL 34474**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$560.00 150.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
GAYLORD, RONALD G.
3681 S.W. 52ND TERRACE
OCALA FL** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
DANNER, MAC H
3681 52ND TERRACE
OCALA FL** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**ST
GAYLORD, NANCY C
3681 S.W. 52ND TERRACE
OCALA FL** ☐ Delete

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

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☐ Delete

TITLE
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☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

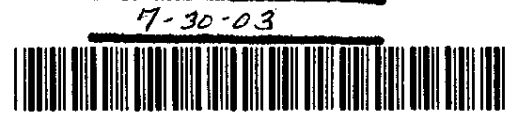
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Aug 15, 2003 8:00 am
Secretary of State

08-15-2003 90080 023 ***150.00



90150578

☐ CHECK HERE IF MAKING CHANGES

012152 AV

CR2E034 (4/03)



Attachment

G.P. Masonry of Ocala

Specializing in Masonry

Dependable • Finest Quality • Licensed & Insured

90150578
H64596

DIVISION OF CORPORATIONS

GP. CONSTRUCTION CO. OF OCALA, INC. , NEVER RECIEVED OUR RENEWAL NOTICE FROM THE DIVISION OF CORPORATIONS. WE APOLOGIZE FOR THE INCONVIENENCE. PLEASE ACCEPT OUR CHECK FOR REINSTATEMENT OF GP. CONSTRUCTION CO. OF OCALA, INC. DOCUMENT# H64596.

THANK YOU

RON GAYLORD/PRESIDENT

PAID

CK. NO. # 0671
DATE 7-30-03

MAILED

7-30-03