

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

8/22

FILED
Sep 02, 2003 8:00 am
Secretary of State

08-22-2003 90105 019 ***158.75
09-02-2003 90182 012 ***391.25

DOCUMENT # H78559

1. Entity Name
GORA/MCGAHEY ASSOCIATES IN ARCHITECTURE, INC.



Principal Place of Business
% BRUCE T. GORA, AIA
43 BARKLEY CIRCLE, SUITE 202
FT. MYERS FL 33907

Mailing Address
% BRUCE T. GORA, AIA
43 BARKLEY CIRCLE, SUITE 202
FT. MYERS FL 33907



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2583797**

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GORA, BRUCE T., AIA
43 BARKLEY CIRCLE, SUITE #202
FT. MYERS FL 33907

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 \$150.00
After May 1, 2003 Fee will be \$550.00
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
PD
GORA, BRUCE T., AIA
43 BARKLEY CIRCLE #202
FT MYERS FL ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VTD
MCGAHEY, DAN ROBERT, AIA
43 BARKLEY CIRCLE #202
FT MYERS FL ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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)(l), 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 address, with all other like empowered.

SIGNATURE:

REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/20/03 239-275-0225
Date Daytime Phone #

CR2E034 (10/02)

Attachment 80145489

H78559
**Gora
McGahey**
ASSOCIATES IN
ARCHITECTURE

August 20, 2003

LETTER

Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

Re: 2003 Uniform Business Report
Document #H78559

To Whom It May Concern:

We were unable to file the above referenced document by the May 1, 2003 deadline. I was on maternity leave and being the sole person in charge of this filing, it did not get done.

I was hoping that since we have been timely in the past, you would accept our payment of \$158.75 and not charge us the late fee.

Please let me know at your earliest convenience if this will be acceptable.

Sincerely,

Gora McGahey Associates in Architecture, Inc.

Denise Weisinger

Denise Weisinger
Office Manager