

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2002 8:00 am
Secretary of State

03-27-2002 90082 034 ***150.00

DOCUMENT # H87648

1. Entity Name

GENE FRY AUCTION AND MARKETING, INC.

Principal Place of Business

**9130 AIRWAY DRIVE
 PENSACOLA FL 32514**

Mailing Address

**127 E. ZARAGOZA
 SUITE 206
 PENSACOLA FL 32501**

B0052818



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

711-A W GARDEN ST
 Suite, Apt. #, etc.

City & State

Zip

Country

City & State

PENSACOLA FL

Zip

32501

Country

4. FEI Number

59-2737448

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**BASS & SANDFORT ACCOUNTANTS
 127 E. ZARAGOZA STREET
 SUITE 206
 PENSACOLA FL 32501**

7. Name and Address of New Registered Agent

Name: **Bass & Sandfort Accountants Inc.**
 Street: **711-A W. Garden St.**
 City: **Pensacola FL 32501**

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: (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, 2002 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

TITLE: **PD** ☐ Delete
 NAME: **FRY, GENE**
 STREET ADDRESS: **9130 AIRWAY DRIVE**
 CITY-ST-ZIP: **PENSACOLA FL 32514**

TITLE: ☐ Delete
 NAME: ☐ Delete
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 CITY-ST-ZIP: ☐ Delete

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 CITY-ST-ZIP: ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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 NAME: ☐ Change ☐ Addition
 STREET ADDRESS: ☐ Change ☐ Addition
 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 #

CR2E034 (9/01)