

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 16, 2002 8:00 am
Secretary of State

01-16-2002 90066 034 ***150.00

DOCUMENT # H92451

1. Entity Name

G. MOORE ENTERPRISES, INC.

Principal Place of Business

**6200 9TH ST NO
 ST. PETERSBURG FL 33702
 US**

Mailing Address

**6200 9TH ST NO
 ST. PETERSBURG FL 33702
 US**

2. Principal Place of Business

Suite, Apt. #, etc.
3325 Ulmerton Rd. Suite #2

City & State
Clearwater Florida

Zip Country
33762 Pinellas

3. Mailing Address

3325 Ulmerton Road

Suite, Apt. #, etc.
Suite # 2

City & State
Clearwater, Florida

Zip Country
33762 Pinellas



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-2618299**

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**BRYAN, W.E.
 222 N. BELCHER ROAD
 CLEARWATER FL 34625**

7. Name and Address of New Registered Agent

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) ☐

**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 **MOORE, GARY R.**
 STREET ADDRESS **11375-60TH ST.,N.**
 CITY-ST-ZIP **PINELLAS PARK FL**

TITLE **STD** ☐ Delete
 NAME **MOORE, NANCY JO**
 STREET ADDRESS **11375-60TH ST.,N.**
 CITY-ST-ZIP **PINELLAS PARK FL**

TITLE **VPD** ☐ Delete
 NAME **MOORE, JEFFREY D.**
 STREET ADDRESS **11375-60TH ST N**
 CITY-ST-ZIP **PINELLAS PK FL**

TITLE **VPD** ☐ Delete
 NAME **MOORE, STEVE B**
 STREET ADDRESS **11375 60 ST N**
 CITY-ST-ZIP **PINELLAS PK FL**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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 CITY-ST-ZIP

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: Gary R. Moore, President 1-9-02 727-573-4528
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)