

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 16, 2002 8:00 am**  
**Secretary of State**

04-16-2002 90054 007 \*\*\*150.00

**DOCUMENT # J46623**

1. Entity Name  
**G C I INC.**

Principal Place of Business  
**3681 31 AV SW**  
**NAPLES FL 34117**

Mailing Address  
**3681 31 AV SW**  
**NAPLES FL 34117**



2. Principal Place of Business  
**3801 4TH ST W**  
 Suite, Apt. #, etc.

3. Mailing Address  
**3801 4TH ST W**  
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
**LEE HIGH ACRES, FL.**  
 Zip  
**33971**  
 Country  
**LEE**

City & State  
**LEE HIGH ACRES, FL**  
 Zip  
**33971**  
 Country  
**LEE**

4. FEI Number  
**59-2744031**

Applied For  
 Not Applicable

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

**6. Name and Address of Current Registered Agent**

**CLARK, GENE H.**  
**3681 31 AV SW**  
**NAPLES FL 34117**

**7. Name and Address of New Registered Agent**

Name  
**CLARK, GENE H.**  
 Street Address (P.O. Box Number is Not Acceptable)  
**3801 4TH ST W**  
 City  
**LEE HIGH ACRES, FL** Zip Code  
**33971**

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**

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE  Delete  
**PDT**  
 NAME **CLARK, GENE H.**  
 STREET ADDRESS **3681 31 ST AV SW**  
 CITY-ST-ZIP **NAPLES FL 34117**

TITLE  Change  Addition  
**PDT**  
 NAME **CLARK, GENE H.**  
 STREET ADDRESS **3801 4TH ST W**  
 CITY-ST-ZIP **LEE HIGH ACRES, FL 33971**

TITLE  Delete  
**V**  
 NAME **CLARK, BENJAMIN W.**  
 STREET ADDRESS **3681 31 ST AV SW**  
 CITY-ST-ZIP **NAPLES FL 34117**

TITLE  Change  Addition  
**V**  
 NAME **SMITH SANDRA J.**  
 STREET ADDRESS **3801 4TH ST W**  
 CITY-ST-ZIP **LEE HIGH ACRES, FL 33971**

TITLE  Delete  
**S**  
 NAME **ARNOLD, IRA T.**  
 STREET ADDRESS **201 QUAIL FOREST BLVD.**  
 CITY-ST-ZIP **NAPLES FL**

TITLE  Change  Addition

TITLE  Delete

TITLE  Change  Addition

TITLE  Delete

TITLE  Change  Addition

TITLE  Delete

TITLE  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: Gene H. Clark **GENE H. CLARK** 4/2/02 239-369-4652  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

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CR2E034 (9/01)