

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Mar 14, 2001 08:00 AM**
Secretary of State**DOCUMENT # J47930**1. Entity Name
GUENTHER-VORRUCKEN, INC.

Principal Place of Business

4915 S TAMiami TR

SARASOTA

34231

FL

US

Mailing Address

4915 S. TAMiami TR.

SARASOTA

34231

FL

US

2. Principal Place of Business

4915 SOUTH TAMiami TRAIL

3. Mailing Address

4915 SOUTH TAMiami TRAIL

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

SARASOTA

FL

City & State

SARASOTA

FL

Zip

34231

Country

US

Zip

34231

Country

US

4. FEI Number

59-2795224

Applied For

Not Applicable

5. Certificate of Status Desired

☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

GUENTHER ANDREW J
8834 FISHERMAN'S BAY BLVD

SARASOTE

34231

FL

US

7. Name and Address of New Registered Agent

Name

GUENTHER ANDREW JMR

Street Address (P.O. Box Number is Not Acceptable)

8834 FISHERMAN'S BAY BOULEVARD

City

SARASOTA

FL

Zip Code

34231

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 **ANDREW J GUENTHER****03/14/2001**

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, 2001 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	V	<input checked="" type="checkbox"/> Delete
NAME	KELLER JONATHAN D	
STREET ADDRESS	1232 SOUTH VIEW DRIVE	
CITY-ST-ZIP	SARASOTA FL 34242	
TITLE	CT	<input type="checkbox"/> Delete
NAME	MUNTER HAROLD G	
STREET ADDRESS	661 MOURNING DOVE DRIVE	
CITY-ST-ZIP	SARASOTA FL 34236	
TITLE	PS	<input type="checkbox"/> Delete
NAME	ANDREW J. GUENTHER	
STREET ADDRESS	8834 FISHERMAN'S BAY BLVD	
CITY-ST-ZIP	SARASOTA FL 34231	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	PS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GUENTHER ANDREW JMR	
STREET ADDRESS	8834 FISHERMAN'S BAY BLVD	
CITY-ST-ZIP	SARASOTA FL 34231	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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: **Harold G Munter**

CT

03/14/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)