2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE

FILED Jan 25, 2001 8:00 am Secretary of State **DOCUMENT # J52111** 1. Entity Name GATEWOOD GLASS, INC. 01-25-2001 90117 031 ***150.00 Principal Place of Business Mailing Address 4700 LAREDO AVE 4700 LAREDO AVE FT. MYERS FL 33905 FT. MYERS FL 33905 A0010520 US LIS Principal Place of Business 3. Mailing Address ummins Guet SAME Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For Lity & State City & State 4. FEI Number 59-2779361 HORT MYERS Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired ISA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GATEWOOD, RODNEY Street Address (P.O. Box Number is Not Acceptable) 4700 LAREDO AVE FORT MYERS FL 33905 Zip Code City FL 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) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change ☐ Addition ☐ Delete TITLE TITLE GATEWOOD, RODNEY NAME 4551 Cummins Court STREET ADDRESS 4700 LAREDO AVE STREET ADDRESS FORT MYERS, FL 33905 CITY-ST-ZIP CITY-ST-ZIP FT. MYERS FL 33905 ☐ Delete TITLE 4551 Cummins Court GATEWOOD, ANGELISA NAME NAME STREET ADDRESS 4700 LAREDO AVE STREET ADDRESS FORT MYERS, FL 33905 CITY-ST-ZIP CITY-ST-7IP FT. MYERS FL 33905 ☐ Addition TITLE Delete JIILE. GATEWOOD, STEVEN 4551 Cummins CourT NAME NAME STREET ADDRESS 4700 LAZEDO AVE STREET ADDRESS FORT MYERS. FE 33905 CITY-ST-7IP CITY-ST-7IP FORT MYERS FL 33905 ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Chance ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 of 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.