## 2002 UNIFORM BUSINESS REPORT (UBR)

## Apr 24, 2002 8:00 am Secretary of State DOCUMENT # J67201 1. Entity Name GATOR INVESTMENTS, INC. 04-24-2002 90266 039 \*\*\*158 Principal Place of Business Mailing Address % GERARD F. KEATING % GERARD F. KEATING 1012 S. RIDGEWOOD AVE. (2017) 2017 2017 (1) 1012 S. RIDGEWOOD AVE. DAYTONA BEACH FL 32114- -- Carrier Street DAYTONA BEACH-FL 32114 TUSTE & COLDER 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE (A.S. City & State City & State 4. FEI Number Applied For 59-2819181 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WILLIAMS, ODOLL V JR. Street Address (P.O. Box Number is Not Acceptable) 1012 S. RIDGEWOOD AVENUE DAYTONA BEACH FL 32114 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 4 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE CR2E034 (9/01 Change ☐ Addition WILLIAMS, ODOLL V., JR. NAME NAME 1012 S. RIDGEWOOD AVE. STREET ADDRESS STREET ADDRESS DAYTONA BEACH FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition LUNDQUIST, FRED NAME NAME 1012 S. RIDGEWOOD AVE. STREET ADDRESS STREET ADDRESS DAYTONA BEACH FL CITY-ST-7IP CITY-ST-ZIP ☐ Defete TITLE Change ☐ Addition KELLER, JOHN ----NAME NAME STREET ADDRESS 1012 S. RIDGEWOOD AVE. STREET ADDRESS CITY-ST-ZIP DAYTONA BEACH FL CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change ☐ Addition 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 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 all other like empowered.

SIGNATURE: <u>\( \Cdot \)</u>

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/02 386-254-2925

FILED

Daytime Phone #