FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 10:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **K50956** **(7)**

1. Corporation Name
GBP WITH EXCELLENCE, INC.

Principal Place of Business	Mailing Address
~~6107 MEMORIAL HWY~~ ~~STE F~~ ~~TAMPA FL 33615~~	~~6107 MEMORIAL HWY~~ ~~STE F~~ ~~TAMPA FL 33615~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **12/05/1988**
3a. Date of Last Report: **07/05/1994**

2. Principal Place of Business
21 **5660 W. CYPRESS ST.**
Suite, Apt. #, etc.
22 **SUITE H**
City & State
23 **TAMPA, FL**
Zip 24 **33607** Country 25 **HILLSBORO**

2a. Mailing Address
26 **5660 W. CYPRESS ST**
Suite, Apt. #, etc.
27 **SUITE H**
City & State
28 **TAMPA, FL**
Zip 29 **33607** Country 30 **HILLSBORO**

4. FEI Number: **65-0085327** ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

BARDWELL, WILLIAM E.
6107 MEMORIAL HWY
STE F
TAMPA FL 33615

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) **5660 W. CYPRESS ST**
83 **SUITE H**
84 City **TAMPA** **FL** 85 Zip Code **33607**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: **WILLIAM E. BARDWELL, PRESIDENT** **01/31/95**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	11 TITLE		☐ Change ☐ Addition
NAME	BARDWELL, WILLIAM E.	12 NAME		
STREET ADDRESS	3139 HYDE PARK DR.	13 STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER FL	14 CITY-ST-ZIP		
TITLE	VP	21 TITLE		☐ Change ☐ Addition
NAME	BREWER, RODNEY	22 NAME		
STREET ADDRESS	5010 TWIN PINE DR	23 STREET ADDRESS		
CITY-ST-ZIP	PLANT CITY FL	24 CITY-ST-ZIP		
TITLE	T	31 TITLE		☐ Change ☐ Addition
NAME	KORTUM, DALE J.	32 NAME		
STREET ADDRESS	10203 LAKE GROVE DR	33 STREET ADDRESS		
CITY-ST-ZIP	ODESSA FL	34 CITY-ST-ZIP		
TITLE	S	41 TITLE		☐ Change ☐ Addition
NAME	VARRONE, JIM	42 NAME		
STREET ADDRESS	8730 LAKE HALL PL	43 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL	44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **WILLIAM E. BARDWELL, PRESIDENT** **01/31/95**
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

0297611 CP