

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 15, 2001 8:00 am
Secretary of State

07-25-2001 90014 018 ***150.00
 08-15-2001 90007 031 ***400.00

DOCUMENT # L05675

1. Entity Name

GULFSTREAM EQUITY MANAGEMENT, INC.

Principal Place of Business

ATT: CLINT NANGLE
500 WEST HWY 316
CITRA FL 32113
US

Mailing Address

ATT: CLINT NANGLE
500 WEST HWY 316
CITRA FL 32113
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NANGLE, CLINT
500 WEST HWY 316
CITRA FL 32113

Name

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

City

FL

Zip Code

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)

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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
NAME
STREET ADDRESS
CITY-ST-ZIP

D NANGLE, CLINT
500 WEST HWY 316
CITRA FL 32113

☐ Delete

TITLE
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TITLE
NAME
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CITY-ST-ZIP

☐ 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/19/01

Date

352.595.4456

Daytime Phone #

CR2E034 (5/01)

Attachment Doc#



L05675

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

July 26, 2001

GULFSTREAM EQUITY MANAGEMENT, INC.

ATT: CLINT NANGLE

500 WEST HWY 316

CITRA, FL 32113 US

Subject: GULFSTREAM EQUITY MANAGEMENT, INC.

Reference
Number: L05675

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report has not been filed and a copy is being returned for the following correction(s):

The fee to file the profit annual report/uniform business report is \$150.00 plus \$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please add an additional \$8.75.

There is a balance due of \$400.00.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

8/9 SIRS: I HAVE NO RECORD OF
REC'ING ORIGINAL. ENCLOSED \$400.

/jg

ANNUAL REPORTS SECTION

CLINT NANGLE