

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L32733

1. Entity Name

GULF HORIZON CORPORATION OF ISLAMORADA, FLORIDA

FILED

Mar 21, 2000 8:00 am
Secretary of State

03-21-2000 90070 029 ***158.75

Principal Place of Business

Mailing Address

84457 OLD OVERSEAS HWY.
P. O. BOX 633
ISLAMORADA FL 33036

84457 OLD OVERSEAS HWY.
P. O. BOX 633
ISLAMORADA FL 33036-0633

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0160918

Applied For

Not Applicable

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

THOMAS, LARRY
84457 OLD OVERSEAS HWY
ISLAMORADA FL

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 \$150.00
After MAY 1, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PSD
THOMAS, LARRY
316 NORTH DRIVE
ISLAMORADA FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VTD
THOMAS, ALBERT O
2376 GOLF BROOK DR
WELLINGTON FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VTD
Thomas, Albert O
401 Mosley Stone Court, Village on the Green
Longwood, FL 32779 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VD
BRADACH, DAVID
2150 GOODLETTE RD N #102
NAPLES FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VD
Bradach, David
3657 Arnold Ave
Naples, FL 34104 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

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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:

LARRY A. THOMAS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/00

Date

305-664-4435

Daytime Phone #

CR25034 10/00