

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M69088

1. Entity Name

GULF PAPER SUPPLY, INC.

FILED
Mar 27, 2001 8:00 am
Secretary of State

03-27-2001 90315 001 ***150.00

A0000000

Principal Place of Business
%THOMAS M. MARLER
319 GREENACRES RD.
FT. WALTON BEACH, FL 32547

Mailing Address
%THOMAS M. MARLER
319 GREENACRES RD.
FT. WALTON BEACH, FL 32547

2. Principal Place of Business
%THOMAS M. MARLERSuite, Apt. #, etc.
796 NAVY STREETCity & State
FT. WALTON BEACH, FLORIDAZip
32547Country
UNITED STATES3. Mailing Address
%THOMAS M. MARLERSuite, Apt. #, etc.
796 NAVY STREETCity & State
FT. WALTON BEACH, FLORIDAZip
32547Country
UNITED STATES4. FEI Number
59-2871989Applied For
Not Applicable5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MARLER, THOMAS M.
319 GREENACRES RD.
FT. WALTON BEACH, FL 32547

7. Name and Address of New Registered Agent

Name
MARLER, THOMAS M.
Street Address (P.O. Box Number is Not Acceptable)
129 VIRGINIA DRIVE NW
City
FT. WALTON BEACH FL Zip Code
32548

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, 2001 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PD
MARLER, THOMAS M.
319 GREENACRES ROAD
FT. WALTON BEACH, FL 32547 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
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CITY-ST-ZIP

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CITY-ST-ZIP

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TITLE
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STREET ADDRESS
CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PD
MARLER, THOMAS M.
129 VIRGINIA DRIVE NW
FT. WALTON BEACH, FL 32548 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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CITY-ST-ZIP

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☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
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:

Thomas M. Marler

THOMAS M. MARLER MAR. 19, 2001 850-862-0431

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/1/00)