## **DOCUMENT # M74467**

1. Entity Name

CHRISTINE GIBBONS, INC.

## FILED Feb 13, 2001 8:00 am Secretary of State 02-13-2001 90018 015 \*\*\*150.00

Principal Plac	ce or Busines:	3	•	Mailing Address									
P.O. BOX 23 PALM BEACH I		Peruvian A		P.O. BOX 2302 . 12 5 73 2 PALM BEACH FL 33480									
									18631 BIBIL 13818 BI	   (11)   (11)   (11)   (11)	<b>                                    </b>	11 <b>2</b> 11 (1211 (1211)	
2. Principal F	Place of Busin	ess	1.3	J. Mailing Address	-		<del></del>						
P.O. Box 2302				P.O. Box 2302					IEBNI ENGIN BIRDIA EN	iili i <b>sei bie</b> il bi	TII BIEN TYDN I	<b>                                   </b>	
Suite, Apt. #, etc.				Suite, Apt. #, etc.					DO NOT WE	RITE IN THIS	SPACE		
134 Peruvian Avenue				134 Peruvian Avenue									
City & State				City & State				I. FEI Number	65-00320	39	$\rightarrow$	Applied For—	]-
	lm Beach, Florida			Palm Beach, Florid								Not Applicable	
Zip 33480				Count USA	•	5	Certificate of	Status Desired	ı 🗆	<b>\$8.75</b> A Fee Regu			
6. Name and Address of Current R			rent Rec	33480		7. Name and Address of New Regis			Pegieterec				
	0. Hame	and Address of Car	ent neg	natered Agent		Name		, italije and A	duless of New	negisteret	Agent		1
CAL	DWEH!~MAI	NLEY P., JR.		والمستنا للمهيدة الإمراج	ا منتو منا								-
324 ROYAL PALM WAY				Street Add			ddress (P.O. Box Number is Not Acceptable)						
	M BEACH F				t		·····					<del></del>	1
					1			<del> </del>			<del>- , -</del>		
						City				F	L Zip Co	ode	Ì
8. The above	named entity	submits this stateme	nt for the	purpose of changing its	registere	d office or	registered	agent or both	in the State of I	Fiorida			1
				, - , - , - , - , - , - , - , - , - , -	- g			-9				_	
SIGNATURE													
SIGNATIONE	Signature, typed	or printed name of registered a	agent and tit	le if applicable. (NOTi	E: Registered	Agent signate	ure required whe	n reinstating)		DATE			ľ
9. This corpo	oration is eligi	ble to satisfy its Intang	aldin	FILE NOW!	!!! FEE	S \$150.0	00					_	1
Tax filing requirement and elects to do so.			,,,,,	After MAY 1, 2001 Fee will be \$550.					ion Campaign F	•	<b>\$5</b> □ Add	.00 May Be	
(See crite	ria on back)		XI	Make Check Payat	ole to De	partmen	t of State	Truși	Fund Contribut	ноп.	⊔ Add	ed to Fees	
11.		OFFICERS A	ND DIR	ECTORS	12.			ADDITIONS/C	HANGES TO OF	FFICERS AN	D DIRECTO	RS IN 11	1
TITLE	PTD			X Delete	TITLE		PSD				X Change	Addition	] 6
NAME	ROBERTS, CHRISTINE G						Rober	oberts, Christine Gibb 0. Box 2302, 134 Peru		bbons			(10/00)
STREET ADDRESS P.O. BOX 2953, 407 PRIMAVERA				AY Y		T ADDRESS				eruvian	Ave.		E034
CITY-ST-ZIP	PALM BEA	CH FL			CITY-	ST-ZIP		Beach, I	L 33480				ļŭ
TITLE	TD			🔀 Delete .	TITLE		TD				X Change	Addition	ä
NAME	GIBBONS, VERA C			NAME			ns, Vera					ļ	
STREET ADDRESS PO BOX-23202 134 PERUVIAN AV PALM BEACH FL 33480				* * * · <del></del>	CITY-	ADDRESS	P.O.	Box2302	., -134 Pe	eruvian	Ave.		
	PALM BEA	CH FL 33480					Palm.	Beach, F	L 33480				1
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NAME	1												
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STREET ADDRESS CITY-ST-ZIP	!					ADDRESS							

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.

Christine Gibbons, Inc.

SIGNATURE: BY: Peb. 2001 (561) 833-4089

SIGNATURE: BY: