

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 09, 2001 8:00 am
Secretary of State

02-07-2001 90143 023 ****61.25

DOCUMENT # N25264

1. Entity Name

GIL CREST FARM OWNERS ASSOCIATION, INC.

Principal Place of Business

GILCREST TRAINING CENTER
 1979 SW 15 WAY
 BELL FL 32619
 US

Mailing Address

GILCREST TRAINING CENTER
 1979 SW 15 WAY
 BELL FL 32619
 US

2. Principal Place of Business

3. Mailing Address

2150 SW 17 Ter.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

BELL FL 32619

City & State

City & State

Zip

Country

Zip

Country

32619

Colchist



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2359585

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SCHALK, ELISE
 1979 SW 15TH WAY
 BELL FL 32619

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box)

Mr. Robert A. LaCasse
 2150 SW 17th Ter.
 Bell, FL 32619

City

FL

Zip Code

8. The above named entity submits a statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

Robert A. LaCasse
 Robert A. LaCasse
 3-3-01

FILE NOW:
 FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
 Department of State

10. OFFICERS AND DIRECTORS

TITLE	PO	☐ Delete
NAME	THOMAS, AUDLEY	
STREET ADDRESS	1869 SW 22ND PL	
CITY-ST-ZIP	BELL FL 32619	
TITLE	VD	☐ Delete
NAME	MELVYN, AYLOR	
STREET ADDRESS	2100 SW 15 WAY	
CITY-ST-ZIP	BELL FL 32619	
TITLE	T	☐ Delete
NAME	SCHALK, ELISE	
STREET ADDRESS	1759 SW 15TH WAY	
CITY-ST-ZIP	BELL FL 32619	
TITLE	SD	☐ Delete
NAME	AUDLEY, MARYANN	
STREET ADDRESS	1869 SW 22ND PLACE	
CITY-ST-ZIP	BELL FL 32619	
TITLE	TD	☐ Delete
NAME	SCHALK, ELISE	
STREET ADDRESS	1979 SW 15 WAY	
CITY-ST-ZIP	BELL FL 32619	
TITLE	D	☐ Delete
NAME	HARP, WARREN	
STREET ADDRESS	1970 SW 15TH WAY	
CITY-ST-ZIP	BELL FL 32619	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	DOUG MILLARD	☒ Change ☐ Addition
NAME	2132 SW 17 Ter	
STREET ADDRESS	BELL FL 32619	
CITY-ST-ZIP	D President	
TITLE	THOMAS AUDLEY	☒ Change ☐ Addition
NAME	1869 SW 22ND PL	
STREET ADDRESS	BELL FL 32619	
CITY-ST-ZIP	V.P.	
TITLE	MELVYN AYLOR	☒ Change ☐ Addition
NAME	2100 SW 15 WAY	
STREET ADDRESS	BELL FL 32619	
CITY-ST-ZIP	Secretary	
TITLE	Mr. Robert A. LaCasse	☒ Change ☐ Addition
NAME	2150 SW 17th Ter.	
STREET ADDRESS	BELL FL 32619	
CITY-ST-ZIP	Treas-	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert A. LaCasse
 Robert A. LaCasse
 2-1-01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone 403-1178

CR037 (10/00)