

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N95000000109

Entity Name: GKTW, INC.

FILED
Jan 21, 2003
Secretary of State

Current Principal Place of Business:

210 SOUTH BASS ROAD
KISSIMMEE, FL 34746

New Principal Place of Business:

Current Mailing Address:

210 SOUTH BASS ROAD
KISSIMMEE, FL 34746

New Mailing Address:

FEI Number: 59-3327385

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LANDWIRTH, PAMELA M
210 S BASS ROAD
KISSIMMEE, FL 34746 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LANDWIRTH, HENRI,
Address: 210 SOUTH BASS ROAD
City-St-Zip: KISSIMMEE, FL 34746

Title: PD () Delete
Name: LANDWIRTH, PAMELA,
Address: 210 SOUTH BASS ROAD
City-St-Zip: KISSIMMEE, FL 34746

Title: TD () Delete
Name: CASSARA, MICHAEL D
Address: 5678 IRLO BENSON HWY
City-St-Zip: KISSIMMEE, FL 34746

Title: SD () Delete
Name: FRANTZ, DICK
Address: 355 S CR 427
City-St-Zip: LONGWOOD, FL 32750

Title: CS () Delete
Name: ORTT, PATRICK
Address: 5850 T G LEE BLVD, SUITE 320
City-St-Zip: ORLANDO, FL 32822

Title: D (X) Delete
Name: BARR, ROBERT
Address: 5559 MASTERS BLVD
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CD (X) Change () Addition
Name: SHORT, MICHAEL
Address: 1000 UNIVERSAL STUDIOS PLAZA
City-St-Zip: ORLANDO, FL 32819

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAMELA LANDWIRTH

PD

01/21/2003

Electronic Signature of Signing Officer or Director

Date