2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000005872

FILED

04 JAN -5 AM 9:48

SECRETARY OF STATE
TALLAHASSEE FLORIDA

0040248

1. Entity Name

THE GANDY BRIDGE AND FRIENDSHIP TRAIL CORPORATION N

Principal Place of Business	Mailing Address
601 N. LOIS AVE. TAMPA FL 33609	601 N. LOIS AVE. TAMPA FL 33609

DO NOT WRITE IN THIS SPACE

REINSTATEMENT 03-04

2. Principal Place of Business	3. Mailing Address
4204 S. RENELLIE	4204 S. RENELLIE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: TAMPA FL	City & State: TAMPA FL
Zip: 33611 Country:	Zip: 33611 Country:

4. FEI Number: NOT APPLICABLE ☐ 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
MILLER, FRANK M ~~601 N. LOIS AVE.~~ ~~TAMPA FL 33609~~	Name: MILLER, FRANK M. Street Address (P.O. Box Number is Not Acceptable): 4204 S. RENELLIE City: TAMPA **FL** Zip Code: 33611

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: Frank Miller 9/30/03

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BRYAN, RALPH T 912 E. KNOLLWOOD ST. TAMPA FL 33604	☐ Delete	SECRETARY ~~SHIRLEY STANFORD, SHIRLEY~~ KIM ALLEN ~~PO BOX 1288~~ P.O. BOX 10404 ~~TAMPA FL 33604~~ 33679	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD DONNELLY, SEAN 601 N LOIS AVE TAMPA FL 33609	☒ Delete	TREAS. BENCOMO, DINAH 4204 S. RENELLIE DR. TAMPA FL 33611	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP RITTER, BEN 12708 SUMMIT ST. TAMPA FL 33612	☐ Delete	100023611771 10/07/03--01037--006 **61.25	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ED MILLER, FRANK M 601 N LOIS AVE TAMPA FL 33609	☐ Delete	ED MILLER, FRANK M. 4204 S. RENELLIE TAMPA FL 33611	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ~~HANSBURY~~, WILLIAM ~~9715 HARBELL AVE. #22~~ ~~TREASURE ISLAND~~ FL 33706	☒ Delete	100023611771 11/18/03--01004--030 **175.00	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KING, W. FRED 305 E. ROSS AVE. TAMPA FL 33602	☒ Delete	100023611770 01/05/04--01051--001 **61.25	☐ Change ☐ Addition

CR2E037 (9/01)

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: RALPH THOMAS BRYAN PRES. SIGNATURE REQUIRED Ralph Thomas Bryan 9-30-03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #