

6/6/0

FILED
Jun 29, 2001 8:00 am
Secretary of State

06-06-2001 90006 046 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 9000000018540

1. Entity Name

GATOR BUZZ, INC.

Principal Place of Business

Mailing Address

SAME

9929 SW 56 LANE
 GAINESVILLE
 FL 32608

2. Principal Place of Business

9929 SW 56 LANE

Suite, Apt. #, etc.

3. Mailing Address

9929 SW 56 LANE

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

GAINESVILLE FL

City & State

GAINESVILLE FL

4. FEI Number

59-3634238

Applied For

Not Applicable

Zip

32608

Country

USA

Zip

32608

Country

USA

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

KRISTIN HERZOG, PRESIDENT
 9929 SW 56 LANE
 GAINESVILLE
 FL 32608

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

KRISTIN HERZOG, PRESIDENT

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, 2011, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PRESIDENT**
 NAME KRISTIN HERZOG
 STREET ADDRESS 9929 SW 56 LANE
 CITY-ST-ZIP GAINESVILLE FL 32608 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **REGISTERED AGENT**
 NAME KRISTIN HERZOG
 STREET ADDRESS 9929 SW 56 LANE
 CITY-ST-ZIP GAINESVILLE FL 32608 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **SUBSCRIBER/DIRECTOR**
 NAME KRISTIN HERZOG
 STREET ADDRESS 9929 SW 56 LANE
 CITY-ST-ZIP GAINESVILLE FL 32608 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **SECRETARY/TREASURER**
 NAME KRISTIN HERZOG
 STREET ADDRESS 9929 SW 56 LANE
 CITY-ST-ZIP GAINESVILLE FL 32608 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **STOCKHOLDER**
 NAME KRISTIN HERZOG
 STREET ADDRESS 9929 SW 56 LANE
 CITY-ST-ZIP GAINESVILLE FL 32608 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **SHAREHOLDER/DIRECTOR**
 NAME KRISTIN HERZOG
 STREET ADDRESS 9929 SW 56 LANE
 CITY-ST-ZIP GAINESVILLE FL 32608 ☐ Delete

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 the 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 empowers.

SIGNATURE:

KRISTIN HERZOG 5/2/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)