

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90421 020 ***150.00

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DOCUMENT # P00000055151

1. Entity Name

GBP SERVICES, INC.



Principal Place of Business

C/O GABLES RESIDENTIAL TRUST
2859 PACES FERRY RD. OVERLOOK III #1450
ATLANTA GA 30339

Mailing Address

C/O GABLES RESIDENTIAL TRUST
2859 PACES FERRY RD. OVERLOOK III #1450
ATLANTA GA 30339

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

58-2554502

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BASTUBA, JONI K
6551 PARK OF COMMERCE BLVD, STE 100
BOCA RATON FL 33487

Name

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

777 Yamato Road

Suite 510

City

Boca Raton

FL

Zip Code

33431

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
WHEELER, CHRIS D
2859 PACES FERRY RD, OVERLOOK III, #1400
ATLANTA GA 30339 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
777 Yamato Road, Suite 510
Boca Raton, FL 33431 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
BANKS, MARVIN R JR
2859 PACES FERRY RD, OVERLOOK III, #1400
ATLANTA GA 30339 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
2859 Paces Ferry Road, Suite 1450
☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
SEVERT, DAWN H
2859 PACES FERRY ROAD, STE. 1450
ATLANTA GA 30339 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPD
Michael M. Hefley
777 Yamato Road, Suite 510
Boca Raton, FL 33431 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
Ashley I. Tewell
2859 Paces Ferry Road, Suite 1450
Atlanta, GA 30339 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
Gregory Iglehart
9912 W. Linebaugh Ave.
Tampa, FL 33626 ☐ Change ☒ Addition

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 607, 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:

SIGNATURE REQUIRED

I Tewell

4/24/03

770-436-4600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)