

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 02, 2002 8:00 am
Secretary of State

06-02-2002 90905 012 ***150.00

DOCUMENT # **P000000 72883**

1. Entity Name

G. G. OF S.W. FLORIDA, INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3300 BONITA BEACH RD

Suite, Apt. #, etc.

UNIT #101

City & State

BONITA SPRINGS FL

Zip

34134

Country

USA

3. Mailing Address

54 SECOND STREET

Suite, Apt. #, etc.

City & State

BONITA SPRINGS FL

Zip

34134

Country

USA

4. FEI Number

65-1052471

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

JILL GASS

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

54 SECOND STREET

City

BONITA SPRINGS

FL

Zip Code

34134

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

JILL GASS

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

(NO) Registered Agent signature required when reissuing

5/20/02

9. This corporation is eligible to satisfy Intangible
Tax filing requirement and elect to do so.
(See criteria on back)

☒

**January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25**

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

TITLE	PRESIDENT
NAME	Jill Gass
STREET ADDRESS	54 2nd St
CITY - ST - ZIP	Bonita Springs FL 34134
TITLE	VICE-PRESIDENT
NAME	George Quinn
STREET ADDRESS	54 2nd St
CITY - ST - ZIP	Bonita Springs, FL 34134
TITLE	TREASURER
NAME	Jill Gass
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	CLERK
NAME	Jill Gass
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	DIRECTOR
NAME	George Quinn
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

DO NOT WRITE
IN THIS SPACE

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JILL GASS

Date

Daytime Phone #

CR2E034B (12/01)

Attachment

FOR PROFIT CORPORATION
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DOCUMENT # P00000072883

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Zip

34134

Country

USA

Fill in all
green area's on
orig - mail w/ check
to Address on attached
page - I never saw a
form like this in your
stuff - you may be
all five pres - but fill in.

DO NOT WRITE IN THIS SPACE

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SIGNATURE

JILL GASS

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5/20/02

(NOTE: Registered Agent Signature Required when re-registering)

DATE

(DATE)

9. This corporation is eligible to satisfy its Intangible
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(See criteria on back)

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☐

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11. OFFICERS AND DIRECTORS

TITLE

PRESIDENT

NAME

Jill Gass

STREET ADDRESS

FILE IN 542nd St

CITY - ST - ZIP

Bonita Springs FL 34134

TITLE

VICE-PRESIDENT

NAME

George Quinn

STREET ADDRESS

FILE IN 542nd St

CITY - ST - ZIP

Bonita Springs FL 34134

TITLE

TREASURER

NAME

Jill Gass

STREET ADDRESS

FILE IN 542nd St

CITY - ST - ZIP

Bonita Springs FL 34134

TITLE

CLERK

NAME

Jill Gass

STREET ADDRESS

FILE IN 542nd St

CITY - ST - ZIP

Bonita Springs FL 34134

TITLE

DIRECTOR

NAME

George Quinn

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CITY - ST - ZIP

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SIGNATURE:

JILL GASS

JILL GASS

5/20/02

941-947-9555

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CH2E034B (12/01)