


2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P00000101407		
1. Entity Name GL-COLORADO, INC.		
Principal Place of Business 5000 SAWGRASS VILLAGE CIRCLE SUITE 28 PONTE VEDRA BEACH, FL 32082	Mailing Address 5000 SAWGRASS VILLAGE CIRCLE SUITE 28 PONTE VEDRA BEACH, FL 32082	

FILED
08 MAR 12 PM 12:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01292008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3679827	Applied For Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

DUSS, JOHN S IV
10110 SAN JOSE BLVD
JACKSONVILLE, FL 32257

**DO NOT WRITE
IN THIS SPACE**

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, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAZARRA, GASPER JR 5000 SAWGRASS VILLAGE CIRCLE SUITE 28 PONTE VEDRA BEACH, FL 32082
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DUSS, JOHN S IV 10110 SAN JOSE BLVD JACKSONVILLE, FL 32257
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03/21/08--01004--006 **288.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #