

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 22, 2001 8:00 am
Secretary of State

03-22-2001 90065 026 ***150.00

DOCUMENT # P00000110111

1. Entity Name

BLACK ORCHID ART GALLERY, INC.

Principal Place of Business

Mailing Address

C/O RICHARD W. WINESETT, AVERY, WHIGHAM
2248 1ST ST
FT MYERS FL 33901

C/O RICHARD W. WINESETT, AVERY, WHIGHAM
2248 1ST ST
FT MYERS FL 33901

2. Principal Place of Business

3. Mailing Address

705 Tarpon Bay Road

P.O. Box 1507

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Sanibel, FL

City & State

Sanibel, FL

Zip

33957

Country

USA

Zip

33957

Country

USA

4. FEI Number

65-1063247

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

WINESETT, RICHARD W
2248 1ST ST
FT MYERS FL 33901

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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, 2001 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 **D** ☐ Delete
NAME **GISH, ALAN R**
STREET ADDRESS **1245 ISABEL DR**
CITY-ST-ZIP **SANIBEL FL 33957**

TITLE **D, P, T** ☒ Change ☐ Addition
NAME **GISH, ALAN R.**
STREET ADDRESS **1245 Isabel Dr.**
CITY-ST-ZIP **Sanibel, FL 33957**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **D, V, S**
STREET ADDRESS **GISH, SHARON L.**
CITY-ST-ZIP **1245 Isabel Dr.**
Sanibel, FL 33957

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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

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 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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Alan R. Gish President
Alan R. Gish, President

(941) 472-8784

Date

Daytime Phone #

CR2E034 (10/00)