

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2002 8:00 am
Secretary of State

02-27-2002 90010 017 ***150.00

DOCUMENT # **P01000022112**

1. Entity Name
BROTHERS POOL CONSTRUCTION, INC.

Principal Place of Business

**679 98 AVE N
NAPLES FL 34108**

Mailing Address

**679 98 AVE N
NAPLES FL 34108**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3673 Prospect Ave.

3. Mailing Address

PO Box 110673

Suite, Apt. #, etc.

Suite, Apt. #, etc.

UNIT # 4

City & State

NAPLES FL. 34104

City & State

NAPLES FL.

4. FEI Number

65-1076936

Applied For

☐ Not Applicable

Zip

34104

Country

Collier

Zip

34108

Country

Collier

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

BISHOP, KEVIN

679 98 AVE N

NAPLES FL 34108

7. Name and Address of New Registered Agent

Name

Robert A. Gossage

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

567 101 st Ave. N.

City

NAPLES

FL

Zip Code
34108

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

Robert A. Gossage

2-6-02

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, 2002 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

TITLE **DPS** ☐ Delete
NAME **BISHOP, KEVIN**
STREET ADDRESS **679 98 AVE N**
CITY-ST-ZIP **NAPLES FL 34108**

TITLE **DVT** ☐ Delete
NAME **GOSSAGE, ROBERT A**
STREET ADDRESS **679 98 AVE N**
CITY-ST-ZIP **NAPLES FL 34108**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PRES** ☒ Change ☐ Addition
NAME **Kevin Bishop**
STREET ADDRESS **517 94th Ave.**
CITY-ST-ZIP **NAPLES FL 34108**

TITLE **VP** ☒ Change ☐ Addition
NAME **Robert A. Gossage**
STREET ADDRESS **567 101st. Ave. N.**
CITY-ST-ZIP **NAPLES FL 34108**

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

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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:

Robert A. Gossage
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-6-02

Date

941-825-2025

Daytime Phone #

CR2E034 (9/01)