

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2003 8:00 am
Secretary of State

04-16-2003 90126 045 ***150.00

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1. Entity Name
GCH REPORTING, INC.



Principal Place of Business
**242 LK TENNESSEE DR.
AUBURNDALE FL 33823**

Mailing Address
**242 LK TENNESSEE DR.
AUBURNDALE FL 33823**



2. Principal Place of Business
4024 Cheverly DR E.
Suite, Apt. #, etc.

3. Mailing Address
4024 Cheverly Dr E.
Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State
Lakeland, FL
Zip
33813
Country
FL

City & State
Lakeland, FL
Zip
33813
Country
FL

4. FEI Number **59-3757356**

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**HAWKS, GENEVA C
242 LK TENNESSEE DR.
AUBURNDALE FL 33823**

7. Name and Address of New Registered Agent

Name **Geneva Charlton**
Street Address (P.O. Box Number is Not Acceptable)
4024 Cheverly DR E.
City **Lakeland** **FL** Zip Code **33813**

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

4/9/03
DATE

(NOTE: Registered Agent signature required when reinstating)

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

TITLE	D	☐ Delete
NAME	HAWKS, GENEVA C	
STREET ADDRESS	242 LK TENNESSEE DR.	
CITY-ST-ZIP	AUBURNDALE FL 33823	
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		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	☒ Change ☐ Addition
NAME	Geneva Charlton	
STREET ADDRESS	4024 Cheverly DR E.	
CITY-ST-ZIP	Lakeland, FL 33813	
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		

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:

Geneva Charlton
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/03 **863 644 6433**
Date Daytime Phone #

CR2E034 (10/02)