

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000081664

FILED  
Apr 30, 2002 8:00 AM  
Secretary of State

Entity Name: GBC DEVELOPMENT INC.

## Current Principal Place of Business:

1637 GRAY BARK DR.  
OLDSMAR, FL 34677

## New Principal Place of Business:

## Current Mailing Address:

1637 GRAY BARK DR.  
OLDSMAR, FL 34677

## New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VAN VALIN, ROBERT T  
1637 GRAY BARK DR.  
OLDSMAR, FL 34677

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: WATERS, MICHAEL  
Address: 1627 GRAY BARK DR.  
City-St-Zip: OLDSMAR, FL 34677

Title: D ( ) Delete  
Name: MEDER, DONALD  
Address: 1626 GRAY BARK DR.  
City-St-Zip: OLDSMAR, FL 34677

Title: D ( ) Delete  
Name: VAN VALIN, ROBERT T  
Address: 1637 GRAY BARK DR.  
City-St-Zip: OLDSMAR, FL 34677

Title: D ( ) Delete  
Name: WALLACE, DEBORAH  
Address: 1634 GRAY BARK DR.  
City-St-Zip: OLDSMAR, FL 34677

Title: P ( ) Delete  
Name: WATERS, LISA  
Address: 1627 GRAY BARK DR.  
City-St-Zip: OLDSMAR, FL 34677

Title: V ( ) Delete  
Name: MEDER, ROSEMARIE  
Address: 1626 GRAY BARK DR.  
City-St-Zip: OLDSMAR, FL 34677

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT T. VAN VALIN

D

04/30/2002

Electronic Signature of Signing Officer or Director

Date