

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

DOCUMENT # P01000115287

1. Entity Name
G & M PIPELINE CORP.



04 AUG -3 AM 11:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
75 N MARKET ST
ASHEVILLE, NC 28801

Mailing Address
75 N MARKET ST
ASHEVILLE, NC 28801



02012004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 01-0569297	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MRYNCZA, BOB
7990 CAUSEWAY BLVD S
ST PETERSBURG, FL 33707

**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, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	GREENBERG, STAN
STREET ADDRESS	75 N MARKET ST
CITY-STATE-ZIP	ASHEVILLE, NC 28801

TITLE	VSTD
NAME	MRYNCZA, BOB
STREET ADDRESS	7990 CAUSEWAY BLVD S
CITY-STATE-ZIP	ST PETERSBURG, FL 33707

TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

900039836749
08/03/04--01040--003 **150.00

**DO NOT WRITE
IN THIS SPACE**

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: Stan Greenberg, Pres. STAN GREENBERG 2-26-04 828-252-5300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Stan Greenberg, Pres.
PL ac 1047 2/26/04