

FILED
Jun 20, 2003 8:00 am
Secretary of State

05-06-2003 90026 040 ***150.00

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

5/c

55049205

DOCUMENT # P02000001802					
1. Entity Name GORDON'S PRECISION SERVICES INC.					
Principal Place of Business 2550 OLSEN RD HAINES CITY, FL 33844 <i>100 Thornhill Rd Auburndale FL 33823</i>			Mailing Address 2550 OLSEN RD HAINES CITY, FL 33844		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
4. FEI Number 20-0011467			Applied For ☐ Not Applicable		
5. Certificate of Status Desired ☐			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent MONTGOMERY, GORDON G 2550 OLSEN RD HAINES CITY, FL 33844			7. Name and Address of New Registered Agent		
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent's signature is required when necessary.)					
9. Election Campaign Financing Trust Fund Contribution ☐			\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS					
TITLE	NAME				
NAME	STREET ADDRESS				
STREET ADDRESS	CITY - ST - ZIP				
CITY - ST - ZIP	☐ Delete				
TITLE	NAME				
NAME	STREET ADDRESS				
STREET ADDRESS	CITY - ST - ZIP				
CITY - ST - ZIP	☐ Delete				
TITLE	NAME				
NAME	STREET ADDRESS				
STREET ADDRESS	CITY - ST - ZIP				
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TITLE	NAME				
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STREET ADDRESS	CITY - ST - ZIP				
CITY - ST - ZIP	☐ Delete				
TITLE	NAME				
NAME	STREET ADDRESS				
STREET ADDRESS	CITY - ST - ZIP				
CITY - ST - ZIP	☐ Delete				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
☐ Change ☐ Addition					
☐ Change ☐ Addition					
☐ Change ☐ Addition					
☐ Change ☐ Addition					
☐ Change ☐ Addition					
☐ Change ☐ Addition					
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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: <i>Gordon G. Montgomery</i> 4/30/03 4/2-9102					

CR2E034 (10/02)