

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 15, 2007 8:00 am**  
**Secretary of State**

02-15-2007 90048 005 \*\*\*150.00

DOCUMENT # P02000053752

1. Entity Name

GWJV, INC.



Principal Place of Business

120 NE 4TH STREET  
FORT LAUDERDALE FL 33301

Mailing Address

120 NE 4TH STREET  
FORT LAUDERDALE FL 33301

40010117



2. Principal Place of Business - No P.O. Box #

1212 E Broward Blvd.

Suite, Apt. #, etc.

Suite 300

3. Mailing Address

1212 E Broward Blvd.

Suite, Apt. #, etc.

Suite 300

1st MOORE

CR2E034 (10/06)

City & State

Fort Lauderdale, FL

City & State

Fort Lauderdale, FL

4. FEI Number

65-1174400

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

RICHARDSON, GEX F  
120 NE 4TH STREET  
FORT LAUDERDALE FL 33301

7. Name and Address of New Registered Agent

Name

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

1212 E Broward Blvd.

Suite 300

City

Fort Lauderdale

FL

Zip Code

33301

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 is required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2007 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, P ☐ Delete  
NAME WRIGHT, GLENN JR  
STREET ADDRESS 120 NE 4TH STREET  
CITY-ST-ZIP FORT LAUDERDALE FL 33301

TITLE D, V ☐ Delete  
NAME WRIGHT, PATRICIA K  
STREET ADDRESS 120 NE 4TH STREET  
CITY-ST-ZIP FORT LAUDERDALE FL 33301

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 ☐ Change ☐ Addition  
NAME  
STREET ADDRESS 1212 E Broward Blvd.  
CITY-ST-ZIP Fort Lauderdale, FL 33301

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS 1212 E Broward Blvd.  
CITY-ST-ZIP Fort Lauderdale, FL 33301

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 exemptions contained in Section 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-7-07

Date

954-761-3472

Daytime Phone #