

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 02, 2001 8:00 am
Secretary of State

04-02-2001 90306 013 ***150.00

0631753

DOCUMENT # P16664

1. Entity Name

GS METALS CORP.

Principal Place of Business

3764 LONGAPUR ROAD
PINCKNEYVILLE IL 62274

Mailing Address

3764 LONGAPUR ROAD
PINCKNEYVILLE IL 62274

2. Principal Place of Business

3764 LONGSPUR RD.
Suite, Apt. #, etc.

3. Mailing Address

3764 LONGSPUR RD.
Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

37-1221635

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	COCO, KENNETH W.	
STREET ADDRESS	3764 LONGSPUR ROAD	
CITY - ST - ZIP	PINCKNEYVILLE IL	
TITLE	S	<input type="checkbox"/> Delete
NAME	GALLITANO, DENNIS J.	
STREET ADDRESS	3500 THREE FIRST NATIONAL PLAZA	
CITY - ST - ZIP	CHICAGO IL	
TITLE	D	<input type="checkbox"/> Delete
NAME	JACKSON, RALPH	
STREET ADDRESS	3764 LONGSPUR RD	
CITY - ST - ZIP	PINCKNEYVILLE IL	
TITLE	D	<input type="checkbox"/> Delete
NAME	BITTO, JAMES	
STREET ADDRESS	3764 LONGSPUR RD	
CITY - ST - ZIP	PINCKNEYVILLE IL	
TITLE	D	<input type="checkbox"/> Delete
NAME	MCKENNA, JAMES P	
STREET ADDRESS	3764 LONGSPUR ROAD	
CITY - ST - ZIP	PINCKNEYVILLE IL	
TITLE	D	<input type="checkbox"/> Delete
NAME	BICKHAUS, NORMAN	
STREET ADDRESS	3764 LONGSPUR ROAD	
CITY - ST - ZIP	PINCKNEYVILLE IL	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JAMES P. MCKENNA
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/01

(618) 357-5353
Daytime Phone #

CR2E034 (10/00)