

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P20763

1. Entity Name

WALDROP, GARY D, INC.

**FILED
Apr 16, 2002 8:00 am
Secretary of State**

04-16-2002 90143 027 ***150.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

15280 Fiddlesticks Blvd.

Suite, Apt. #, etc.

3. Mailing Address

15280 Fiddlesticks Blvd.

Suite, Apt. #, etc.

City & State

FORT MYERS, Florida

Zip

33912

Country

USA

City & State

FORT MYERS, Florida

Zip

33912

Country

USA

4. FEI Number

93-0646480

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name GREG WALTER WALDROP

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

15280 Fiddlesticks Blvd.

City

FORT MYERS

FL

Zip Code
33912

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)

**January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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 NAME STREET ADDRESS CITY-ST-ZIP	<u>President</u> <u>WALDROP, GARY D.</u> <u>15280 Fiddlesticks Blvd</u> <u>FORT MYERS, FL 33912</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>Vice President</u> <u>WALDROP, GREG WALTER</u> <u>11800 Pinewood Lakes Drive</u> <u>FORT MYERS, FL 33912</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>Vice President</u> <u>MIKKESEN, GREGORY P.</u> <u>18623 GERANIUM ROAD</u> <u>FORT MYERS, FL 33912</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>SECRETARY-TREASURER</u> <u>WALDROP, NANCY J.</u> <u>15280 Fiddlesticks Blvd</u> <u>FORT MYERS, FL 33912</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>VICE PRESIDENT</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Nancy J. Waldrop

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Corp. Sec.-Treas. 4-4-02

Date

941-768-3553

Daytime Phone #

CR2E034B (12/01)