

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Mar 30, 1999 8:00 am**  
**Secretary of State**

03-30-1999 90033 004 \*\*\*158.75

0105401

**DOCUMENT # P25503**

1. Corporation Name  
**GP RENFLO, INC.**

Principal Place of Business  
**6305 WESTWOOD BLVD.  
SUITE 200  
ORLANDO FL 32821  
US**

Mailing Address  
**6305 WESTWOOD BLVD.  
SUITE 200  
ORLANDO FL 32821  
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**08/07/1989**

4. FEI Number  
**38-2881091**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

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

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 **2901 W State Road 434**  
Suite, Apt. #, etc.

2a. Mailing Address

26 **2901 W State Road 434**  
Suite, Apt. #, etc.

22 **Suite #141**  
City & State

23 **Longwood, FL**

Zip Country  
24 **32779** 25 **Seminole**

27 **Suite #141**  
City & State

28 **Longwood, FL**

Zip Country  
29 **32779** 30 **Seminole**

9. Name and Address of Current Registered Agent

**SINGER, GARY  
6305 WESTWOOD BLVD  
S200  
ORLANDO FL 32821**

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
**2901 W State Road 434**  
83 Suite #141  
84 City **Longwood,** 85 Zip Code **FL 32779**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

**Gary Singer, Vice President 03/25/99**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PTD** ☐ DELETE  
NAME **STOLLMAN, BERNARD H.**  
STREET ADDRESS **2025 W LONG LAKE RD #104**  
CITY-ST-ZIP **TROY MI**

TITLE **V** ☐ DELETE  
NAME **SINGER, GARY**  
STREET ADDRESS **6305 WESTWOOD BLVD S200**  
CITY-ST-ZIP **ORLANDO FL**

TITLE **VSD** ☐ DELETE  
NAME **ZLOTOFF, PAUL M.**  
STREET ADDRESS **280 DAINES ST, STE 300**  
CITY-ST-ZIP **BIRMINGHAM MI**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP ☒ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS **2901 W State Rd 434, Ste. 141**  
2.4 CITY-ST-ZIP **Longwood, FL 32779**

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**GARY SINGER, Vice President**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**03/25/99 (407) 772-0264**

Date

Daytime Phone #

CR2E034 (11/98)