

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90464 026 ***150.00

DOCUMENT # P93000002917

1. Entity Name

GOLF CARRIAGES OF GAINESVILLE, INC.

Principal Place of Business

Mailing Address

1500 COLONIAL BLVD
 SUITE 103
 FT MYERS FL 33907

1500 COLONIAL BLVD
 SUITE 103
 FT MYERS FL 33907-1025

2. Principal Place of Business

17135 Jean St

3. Mailing Address

17135 Jean St

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Ft Myers, FL

City & State

Ft Myers, FL

4. FEI Number

65-0508205

Applied For

Not Applicable

Zip

33912

Country

USA

Zip

33912

Country

USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MILLIGAN, JOHN P JR
1500 COLONIAL BLVD
SUITE 103
FT MYERS FL 33907

7. Name and Address of New Registered Agent

Name **Roger E Brownell**
 Street Address (P.O. Box Number is Not Acceptable) **17135 Jean St**
 City **Ft 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

R E Brownell
 Roger E Brownell

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

(NOTE, Registered Agent signature required when reinstating)

4/17/00
 DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D	BROWNELL, ROGER E	15370 KILBIRNIE DR	FT MYERS FL 33912	<input type="checkbox"/>
D	BROWNELL, DIAN L	15370 KILBIRNIE DRIVE	FT MYERS FL	<input type="checkbox"/>
D	BROWNELL, JASON E	2311 S 5TH ST APT 111	AUSTIN TX 78704	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

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

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:

R E Brownell
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/00
 Date

941-267-8555
 Daytime Phone #

Roger E Brownell

CR2E034 (9/99)