

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 19, 2001 8:00 am
Secretary of State

03-19-2001 90025 034 ***150.00

0388919

DOCUMENT # P93000002917

1. Entity Name

GOLF CARRIAGES OF GAINESVILLE, INC.

Principal Place of Business

**17135 JEAN ST
 FT MYERS FL 33907**

Mailing Address

**17135 JEAN ST
 FT MYERS FL 33907**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0508205**

Applied For
 Not Applicable

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**

This was supposed to have been changed last year. See 2000 UBR

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, Pres

1/3/01

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Delete
 NAME **D BROWNELL, ROGER E**
 STREET ADDRESS **15370 KILBIRNIE DR**
 CITY-ST-ZIP **FT MYERS FL 33912**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **D BROWNELL, DIAN L**
 STREET ADDRESS **15370 KILBIRNIE DRIVE**
 CITY-ST-ZIP **FT MYERS FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **D BROWNELL, JASON E**
 STREET ADDRESS **2311 S 5TH ST APT 111**
 CITY-ST-ZIP **AUSTIN TX 78704**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
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 CITY-ST-ZIP

TITLE Delete
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 CITY-ST-ZIP

TITLE Change 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:

R E Brownell

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Roger E Brownell

1/3/01

941-267-8555

Daytime Phone #

CR2E034 (10/00)