

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 11:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000033969 (5)

1. Corporation Name

229 GILBERTIE, INC.

Principal Place of Business

4316 MARINE PARKWAY
NEW PORT RICHEY FL 34652

Mailing Address

4316 MARINE PARKWAY
NEW PORT RICHEY FL 34652

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
05/07/1993

3a. Date of Last Report
04/15/1994

2. Principal Place of Business

21 4408 W. Hillsborough Ave

2a. Mailing Address

26 Suite, Apt. #, etc.

22 Tampa, FL

27 City & State

23 City & State

28 City & State

24 Zip 33614 Hillsborough

29 Zip

30 Country

4. FEI Number
59-3179365

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 has liability for intangible tax under § 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

GILBERTIE, ROBERT E
4316 MARINE PARKWAY
NEW PORT RICHEY FL 34652

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

Robert E. Gilbertie, Director

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

(NOTE: Registered agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DP
GILBERTIE, ROBERT E
4316 MARINE PARKWAY
NEW PORT RICHEY FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

VST
GILBERTIE, SANDRA F.
4216 MARINE PKWY
NEW PORT RICHEY FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

☐ Change ☒ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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.

SIGNATURE:

Sandra F. Gilbertie DN/ST

4-28-95

8188480966

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Number