

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000037285

1. Entity Name

G.W.P., INC.

FILED
Feb 08, 2000 8:00 am
Secretary of State

02-08-2000 90036 005 ***158.75

Principal Place of Business

Mailing Address

6753 GARDEN RD
109
RIVIERA BCH FL 33404
US

6753 GARDEN RD
109
RIVIERA BCH FL 33404-5917
US

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 **59-3183520**

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BURNEY, LARRY
6753 GARDEN RD #109
RIVIERA BCH FL 33404

Name

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

City

FL

Zip Code

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

Larry Burney **Larry Burney**

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

(NOTE: Registered Agent signature required when reinstating)

1/10/00
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, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 **Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
BURNEY, LARRY
6753 GARDEN RD #109
RIVIERA BCH FL 33404

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
BURNEY, LANCE
6753 GARDEN RD #109
RIVIERA BCH FL 33404

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BURNEY, JOYCE
6753 GARDEN RD #109
RIVIERA BCH FL 33404

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Larry Burney **Larry Burney**
President

1/10/00
Date

Date

561-845-5525
Daytime Phone #

Daytime Phone #