

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000081530

1. Entity Name

GALLEY ENTERPRISES, INC.

FILED

Apr 22, 2000 8:00 am
Secretary of State

04-22-2000 90056 013 ***150.00

Principal Place of Business

Mailing Address

~~90 LAKE DRIVE~~
PALM BEACH SHORES FL 33404

~~90 LAKE DRIVE~~
PALM BEACH SHORES FL 33404-6218

2. Principal Place of Business

1165 N. OCEAN

3. Mailing Address

1011 SINGER DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SINGER ISLAND

City & State

SINGER ISLAND, FL

Zip

33404

Country

USA

Zip

33404

Country

USA

4. FEI Number

65-0450331

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

WITHERSPOON, BRUCE
90 LAKE DRIVE
PALM BEACH SHORES FL 33404

Name

CAROLYN M. WITHERSPOON

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

1011 SINGER DR

City

SINGER ISLAND

FL

Zip Code

33404

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

Carolyn M. Witherspoon

Bruce W. Witherspoon

April 17, 00

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, 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
PTD
WITHERSPOON, BRUCE
90 LAKE DRIVE
PALM BEACH SHORES FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTSD
CAROLYN MENTING WITHERSPOON
1011 SINGER DRIVE
SINGER ISLAND, FL. 33404 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SVD
MENTING, CAROLYN
90 LAKE DRIVE
PALM BEACH SHORES FL 33404 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
BRUCE WITHERSPOON
90 LAKE DRIVE
PALM BEACH FL. 33404 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

Carolyn M. Witherspoon
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

April 17, 00 561-881-4326

CR2E034 (9/99)