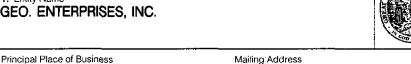
2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P94000035927 DOCUMENT

1. Entity Name GEO. ENTERPRISES, INC.

1602 EAST 8TH STREET



1602 EAST 8TH STREET



FILE Apr 25, 200 Secretary

04-25-2003 90172 013 ***150.00

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of State	A
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STUART FL 3	4996		STUART FL 34996									
2. Principal Place of Business			3 . Mai	3. Mailing Address				<u> </u>	15 51 1			
Suite, Apt. #, etc.				Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
City & State				City & State			4. F	4. FEI Number 65-0474629 Applied For Not Applicable				
Zip	p Country Zip · Cou			Count	ry	5. Certificate of Status Desired \$8.75 Additional Fee Required						
	6. Name	and Address of Current	Registere	ed Agent		7. Name and Address of New Registered Agent						
*,						Name						
BASS, DONALD L						Character (BO Book) and a six Manager (BO						
7166 SOU	JTH EAST O	SPREY STREET				Street Address (P.O. Box Number is Not Acceptable)						
	UND FL 334	140 a						 -				
(T d										
* .		3 B				City			FL	Zip Code	•	
the obligat	named entity lions of registe		or the purp	oose of changing its	registere	d office or regis	stered ag	ent, or both, in the State of Florida.	l am fam	niliar with,	and accept	
SIGNATURE .	Signature, typed o	r printed name of registered agent	and title if app	dicable. (NOT	E: Registered	Agent signature requ	ired when re	einstating)	DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State								Election Campaign Financir Trust Fund Contribution.	ng 🗆		0 May Be to Fees	
10.		OFFICERS AND DIRECTORS		11.		AD	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS					
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NAME		AR, GEORGE T IV		NA		:					1	
STREET ADDRESS CITY-ST-ZIP	1602 EAST Stuart Fl	8TH STREET . 34996				T'ADDRESS ST-ZIP					}	
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

D OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR