

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Jan 30, 2001 8:00 am  
Secretary of State

01-30-2001 90070 026 \*\*\*150.00

DOCUMENT # P95000006345

1. Entity Name

GATOR POOLS OF THE PALM BEACHES, INC.

Principal Place of Business

4308 FOSS ROAD  
LAKE WORTH FL 33461  
US

Mailing Address

4308 FOSS ROAD  
LAKE WORTH FL 33461  
US

2. Principal Place of Business

1110 S. Fed. Hwy #1

3. Mailing Address

1110 S. Fed. Hwy

Suite, Apt. #, etc.

LAKE WORTH, FL

Suite, Apt. #, etc.

#1

City & State

City & State

LAKE WORTH, FL

Zip

33460

Country

Palm Beach

Zip

33460

Country

Palm Beach

6. Name and Address of Current Registered Agent

ABBOTT, JAMES J  
4308 FOSS ROAD  
LAKE WORTH FL 33410

7. Name and Address of New Registered Agent

Name

JAMES J. ABBOTT

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

1110 S. Fed. Hwy 1

City

LAKE WORTH

FL

Zip Code

33460

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

JAMES J. ABBOTT

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1/10/01

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

TITLE	D	<input type="checkbox"/> Delete
NAME	ABBOTT, JAMES J	
STREET ADDRESS	4308 FOSS ROAD	
CITY-ST-ZIP	LAKE WORTH FL 33410	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	VICE-PRESIDENT	
STREET ADDRESS	CHRISTOPHER MADDALINO	
CITY-ST-ZIP	2482 WATERSIDE DRIVE	
	LAKE WORTH, FL 33461	
TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SECRETARY	
STREET ADDRESS	JASON GARNSEY	
CITY-ST-ZIP	501 S.W. 1ST COURT	
	BOYNTON BEACH, FL 33435	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

JAMES J. ABBOTT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

1/10/01

Daytime Phone #

561 6426407

CR2E034 (10/00)