

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000007625

1. Entity Name

GULF COAST VACATION RENTALS OF SGI, INC.

FILED
Sep 07, 2000 8:00 am
Secretary of State

09-07-2000 90038 025 ***550.00

Principal Place of Business

45 EAST FIRST STREET
 ST. GEORGE ISLAND FL 32328
 US

Mailing Address

45 E. FIRST ST.
 ST. GEORGE ISLAND FL 32328
 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 **59-3300024**

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

JAMES, LORA L
 1528 EAST GULF BEACH DRIVE
 ST. GEORGE ISLAND FL 32328

Name **Lewis S. James III**

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

St George Island, Fl 32328

City **FL** Zip Code **32328**

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 *Lewis S. James III*
 Signature, typed or printed name of registered agent and title if applicable.

President

9/6/00
 DATE

(NOTE: Registered Agent signature required when reinstating)

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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	P	<input checked="" type="checkbox"/> Delete
NAME	JAMES, LORA L	
STREET ADDRESS	1528 EAST GULF BEACH DRIVE	
CITY-ST-ZIP	ST. GEORGE ISLAND FL	

TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Lewis S. James III	
STREET ADDRESS	316 Marks Street	
CITY-ST-ZIP	St George Island, Fl 32328	

TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	JAMES, CHARLOTTE A	
STREET ADDRESS	757 EAST GORRIE DRIVE	
CITY-ST-ZIP	ST. GEORGE ISLAND FL	

TITLE	Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Gail B. James	
STREET ADDRESS	316 Marks Street	
CITY-ST-ZIP	SGI, Fl 32328	

TITLE	ST	<input checked="" type="checkbox"/> Delete
NAME	JAMES, LEWIS S III	
STREET ADDRESS	316 MARKS ST	
CITY-ST-ZIP	ST. GEORGE ISLAND FL	

TITLE	Secretary/Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Suzanne Y. Latham	
STREET ADDRESS	1335 East Gulf Beach Drive	
CITY-ST-ZIP	ST George Island, Fl 32328	

TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	MITCHELL, TERRI F	
STREET ADDRESS	1316 PEMBRIDGE WAY	
CITY-ST-ZIP	KENNESAW GA 30144	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
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"/> Delete
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: *Lewis S. James III*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/6/00 *(850) 927-2596*
 Date Daytime Phone #

Lewis S. James III

CR2E034 (5/00)