

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000008643

1. Entity Name

G-P NORT, INC.

FILED

Mar 29, 2001 8:00 am
Secretary of State

03-29-2001 91023 001 11,745.50

Principal Place of Business

2295 CORPORATE BLVD NW
SUITE 222 P O BOX 5010
BOCA RATON FL 33431

Mailing Address

2295 CORPORATE BLVD NW
SUITE 222 P O BOX 5010
BOCA RATON FL 33431

66550



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

2295 Corporate Blvd NW

Suite, Apt. #, etc.
Ste 222

City & State
Boca Raton, FL

Zip
33431

Country
USA

4. FEI Number 65-0554860

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

HERRICK, NORTON
2295 CORPORATE BLVD NW
SUITE 222 P O BOX 5010
BOCA RATON FL 33431

7. Name and Address of New Registered Agent

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

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, 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 PDST ☐ Delete
NAME NORTON HERRICK
STREET ADDRESS 2295 CORPORATE BLVD N.W. STE. 222
CITY-ST-ZIP BOCA RATON FL 33431

TITLE VPAS ☐ Delete
NAME HOWARD HERRICK
STREET ADDRESS 20 COMMUNITY PL
CITY-ST-ZIP MORRISTOWN NJ 07960

TITLE VPAS ☐ Delete
NAME MICHAEL HERRICK
STREET ADDRESS 20 COMMUNITY PL
CITY-ST-ZIP MORRISTOWN NJ 07960

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE VPAS ☒ Change ☐ Addition
NAME Herrick, Howard
STREET ADDRESS 2 Ridgedale Ave, Ste 370
CITY-ST-ZIP Cedar Knolls, NJ 07927

TITLE VPAS ☒ Change ☐ Addition
NAME Herrick, Michael
STREET ADDRESS 2 Ridgedale Ave, Ste 370
CITY-ST-ZIP Cedar Knolls, NJ 07927

TITLE ☐ Change ☒ Addition
NAME Kermalli, Nisara
STREET ADDRESS 2 Ridgedale Ave, Ste 370
CITY-ST-ZIP Cedar Knolls NJ 07927

TITLE CFO ☐ Change ☒ Addition
NAME Klein, Robert
STREET ADDRESS 2 Ridgedale Ave, Ste 370
CITY-ST-ZIP Cedar Knolls NJ 07927

TITLE ☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-22-01

561-241-9880

CR2E034 (10/00)