

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 11, 2001 8:00 am
Secretary of State

01-11-2001 90039 007 ***150.00

DOCUMENT # P95000090497

1. Entity Name

GELCH & TAYLOR, P.A.
GELCH TAYLOR GIULIANTI KOPELOWITZ & OSTROW, P.A.

Principal Place of Business

Mailing Address

8751 W BROWARD BLVD
 STE 408
 PLANTATION FL 33324
 US

8751 W BROWARD BLVD
 STE 408
 PLANTATION FL 33324
 US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

350 E. LAS OLAS BLVD.

350 E. LAS OLAS BLVD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1440

1440

City & State

City & State

FT. LAUDERDALE FL

FT. LAUDERDALE FL

Zip

Country

Zip

Country

33301

USA

33301

USA

4. FEI Number

65-0637822

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

Name

GARY GELCH

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

350 E. LAS OLAS BLVD

SUITE 1440

City

FT. LAUDERDALE

FL

Zip Code

33301

GELCH, AL
11935 HABANA AVE
BOYNTON BEACH FL 33437

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

GARY GELCH

DATE

1/4/01

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

(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 \$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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **GELCH, GARY D**
 CITY-ST-ZIP **8751 N BROWARD BLVD STE 408 PLANTATION FL 33324**

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **TAYLOR, GREGORY B**
 CITY-ST-ZIP **8751 N BROWARD BLVD STE 408 PLANTATION FL 33324**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
 NAME **D**
 STREET ADDRESS **GELCH, GARY D.**
 CITY-ST-ZIP **350 E. LAS OLAS BLVD STE 1440 FT. LAUDERDALE, FL 33301**

TITLE ☒ Change ☐ Addition
 NAME **D**
 STREET ADDRESS **TAYLOR, GREGORY B**
 CITY-ST-ZIP **350 E. LAS OLAS BLVD STE 1440 FT. LAUDERDALE, FL 33301**

TITLE ☐ Change ☒ Addition
 NAME **D**
 STREET ADDRESS **GIULIANTI, STACEY A.**
 CITY-ST-ZIP **350 E. LAS OLAS BLVD STE 1440 FT. LAUDERDALE, FL 33301**

TITLE ☐ Change ☒ Addition
 NAME **D**
 STREET ADDRESS **KOPELOWITZ, BRIAN R.**
 CITY-ST-ZIP **350 E. LAS OLAS BLVD STE 1440 FT. LAUDERDALE, FL 33301**

TITLE ☐ Change ☒ Addition
 NAME **D**
 STREET ADDRESS **OSTROW, JEFFREY M.**
 CITY-ST-ZIP **350 E. LAS OLAS BLVD STE 1440 FT. LAUDERDALE, FL 33301**

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

GARY GELCH

Date

1/4/01

Daytime Phone #

954-525-4100

CR2E034 (10/00)