

**2001 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # P95000091325**

1. Entity Name

**GATOR'S DOCKSIDE OF WINTER PARK, INC.****FILED**  
**Feb 27, 2001 8:00 am**  
**Secretary of State**

02-27-2001 90328 030 \*\*\*150.00

Principal Place of Business

Mailing Address

**661 STONEFIELD LOOP  
HEATHROW FL 32746  
US****661 STONEFIELD LOOP  
HEATHROW FL 32746  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number **59-3346252**

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****CIPPARONE, PAUL  
661 STONEFIELD LOOP  
HEATHROW FL 32746**

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****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PSTD  
CIPPARONE, ANTHONY  
815 SHRIVER CIRCLE  
LAKE MARY FL**TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**3185 DEER CHASE RUN  
HONGWOOD, FL 32779**TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
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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 the signature of the corporation or the receiver or trustee empowered to execute this report. If the information is changed, or on an attachment, it shall be so indicated.

CR2E034 (10/00)