

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000097720

Entity Name

GULF-ATLANTIC EDUCATIONAL PRODUCTS, INC.

FILED

Apr 25, 2000 8:00 am  
Secretary of State

04-25-2000 90003 035 \*\*\*158.75

Principal Place of Business Mailing Address  
211 SHOREWOOD WAY P O BOX 7667  
JUPITER FL 33458 JUPITER FL 33468-7667  
US US

110420



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address  
19055 SE Coral Reef Lane

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State  
Jupiter, FL

Zip Country Zip Country  
33458 Martin

4. FEI Number 65-0633651 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

VALDES-FAULI CORPORATE SERVICES, INC.  
777 S. FLAGLER DR.  
SUITE 500 EAST  
W PALM BEACH FL 33401

Name  
Earl K. Mallory, P.A., Attorney at Law  
Street Address (P.O. Box Number is Not Acceptable)  
1907 Commerce Lane

Suite 104  
City Jupiter FL Zip Code 33458

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 Earl K. Mallory, P.A., Attorney at Law 4-18-00  
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, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State** 10. Election Campaign Financing ☐ \$5.00 May Be  
Trust Fund Contribution. Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PTS	<input type="checkbox"/> Delete	TITLE	PTS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BARNES, JACQUELYN L		NAME	Farley, Jacquelyn L	
STREET ADDRESS	211 SHOREWOOD WAY		STREET ADDRESS	19055 Southeast Coral Reef Lane	
CITY-ST-ZIP	JUPITER FL		CITY-ST-ZIP	Jupiter, FL 33458	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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NAME			NAME		
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NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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: Jacquelyn L Farley 4-18-00 (561) 575-2900  
Signature, typed or printed name of signing officer or director Date (561) 575-0004

CR2E034 (9/99)