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Apr 10 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000051189 (4)

1. Corporation Name

MARIE GILBERT, P.A.

Principal Place of Business

687 HOUSE WREN CIRCLE
PALM HARBOR FL 34683

Mailing Address

687 HOUSE WREN CIRCLE
PALM HARBOR FL 34683-6264



3. Date Incorporated or Qualified

06/13/1996

3a. Date of Last Report

2. Principal Place of Business

21 1874 Maplewood Ct.

Suite, Apt. #, etc.

22

City & State

23 Palm Harbor FL

Zip

24 34684

Country

25 USA.

2a. Mailing Address

26 1874 Maplewood Ct.

Suite, Apt. #, etc.

27

City & State

28 Palm Harbor FL 34684

Zip

29 34684

Country

30 USA.

4. FEI Number

59-3384762

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

GILBERT, MARIE
687 HOUSE WREN CIRCLE
PALM HARBOR FL 34683

10. Name and Address of New Registered Agent

81

Name

Gilbert, Marie

82

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

1874 Maplewood Ct.

83

84

City

Palm Harbor

FL

Zip Code

34684

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME GILBERT, MARIE
STREET ADDRESS 687 HOUSE WREN CIRCLE
CITY- ST- ZIP PALM HARBOR FL 34683

TITLE D ☐ DELETE

NAME GILBERT, GEORGE
STREET ADDRESS 687 HOUSE WREN CIRCLE
CITY- ST- ZIP PALM HARBOR FL 34683

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME Gilbert, Marie
1.3 STREET ADDRESS 1874 Maplewood Ct
1.4 CITY- ST- ZIP Palm Harbor, FL 34684

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME Gilbert, George
2.3 STREET ADDRESS 1874 Maplewood Ct
2.4 CITY- ST- ZIP Palm Harbor, FL 34684

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

MARIE GILBERT, P.A.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/4/97

813 786-1269

CR2E034 (9/96)