

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 13, 2001 8:00 am
Secretary of State

04-13-2001 90040 033 ***150.00

DOCUMENT # P96000103353

1. Entity Name

GREGORY STREET WAREHOUSE, INC.

Principal Place of Business

Mailing Address

**125 W. ROMANA STRET
SUITE 224
PENSACOLA FL 32501**

**125 W. ROMANA STRET
SUITE 224
PENSACOLA FL 32501**

2. Principal Place of Business
17 E Main Street

3. Mailing Address
17 E Main Street

Suite, Apt. #, etc.
Suite 100

Suite, Apt. #, etc.
Suite 100

City & State
Pensacola, FL

City & State
Pensacola, FL

Zip
32501

Country
US

Zip
32501

Country
US

4. FEI Number **59-3417510**

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

**LOZIER, DANIEL R
125 W. ROMANA STREET
SUITE 224
PENSACOLA FL 32501**

Name **Daniel R. Lozier**

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

24 West Chase ST.

City **Pensacola**

FL

Zip Code **32501**

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

Daniel R. Lozier Registered Agent / Director

1/11/01

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 **PD** ☐ Delete
NAME **BULLOCK, JOHN H KEITH**
STREET ADDRESS **17 E. MAIN ST, SUITE 100**
CITY-ST-ZIP **PENSACOLA FL 32501**

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

TITLE **D** ☐ Delete
NAME **MAXWELL, RANDY P**
STREET ADDRESS **17 E. MAIN ST, SUITE 100**
CITY-ST-ZIP **PENSACOLA FL 32501**

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

TITLE **STD** ☐ Delete
NAME **SPENCER, BRIAN K**
STREET ADDRESS **17 E. MAIN ST, SUITE 100**
CITY-ST-ZIP **PENSACOLA FL 32501**

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

TITLE **D** ☐ Delete
NAME **LOZIER, DANIEL R**
STREET ADDRESS **125 W ROMANA ST, SUITE 224**
CITY-ST-ZIP **PENSACOLA FL**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **24 West Chase Street**
CITY-ST-ZIP **Pensacola, FL 32501**

TITLE **D** ☐ Delete
NAME **EMLING, CHARLES A III**
STREET ADDRESS **605 CHESAPEAKE DR**
CITY-ST-ZIP **GULF-BREEZE FL 32561**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

J.H.K. Bullock **J.H.K. Bullock**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/11/01

Date

850 432 7772

Daytime Phone #

CR2E034 (10/00)

0031673