

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2002 8:00 am
Secretary of State

05-06-2002 90098 044 ***150.00

DOCUMENT # P97000057990

1. Entity Name
GES RESEARCH CORPORATION

Principal Place of Business

3300 NE 58TH TERR
HIGH SPRINGS FL 32643

Mailing Address

P O BOX 1541
HIGH SPRINGS FL 32655-1541
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3461687

Applied For

Not Applicable

Zip

Country

Zip

Country

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

MALLOY, RAYMOND C
3300 NE 58TH TERR
HIGH SPRINGS FL 32643

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, 2002 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 **MALLOY, RAYMOND C**
 STREET ADDRESS **5311 MOCKINGBIRD DR.**
 CITY-ST-ZIP **ANCHORAGE AK 99507**

TITLE **PD** ☒ Change ☐ Addition
 NAME **MALLOY, RAYMOND C.**
 STREET ADDRESS **3300 NE 58TH TERR**
 CITY-ST-ZIP **HIGH SPRINGS FL 32643**

TITLE **D** ☐ Delete
 NAME **RUSSEL, DANIEL**
 STREET ADDRESS **12045 LOUISE AVE**
 CITY-ST-ZIP **GRENADA HILLS CA 31344**

TITLE **D** ☒ Change ☐ Addition
 NAME **RUSSEL, DANIEL**
 STREET ADDRESS **1400 W 25TH AVE**
 CITY-ST-ZIP **ANCHORAGE AK 99503**

TITLE **D** ☐ Delete
 NAME **MALLOY, KIRK**
 STREET ADDRESS **4610 W. GRAY ST**
 CITY-ST-ZIP **TAMPA FL 33609**

TITLE **D** ☒ Change ☐ Addition
 NAME **MALLOY, KIRK**
 STREET ADDRESS **13023 MARITIME PL**
 CITY-ST-ZIP **SAN DIEGO, CA 92130**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

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: *Raymond C. Malloy*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 22, 2002 (86) 484-1125

Date Daytime Phone #

CR2E034 (9/01)