

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 26, 2002 8:00 am
Secretary of State

03-26-2002 90091 043 ***150.00

DOCUMENT # P97000107748

1. Entity Name
GIBBS FURNITURE STORE, INC.

Principal Place of Business
**226 WEST MAIN STREET
 WAUCHULA FL 33873**

Mailing Address
**226 WEST MAIN STREET
 WAUCHULA FL 33873**



2. Principal Place of Business
765 N 6TH AVE

3. Mailing Address
765 N 6 TH AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
WAUCHULA FL

City & State
WAUCHULA FL

4. FEI Number **65-0802159**

Applied For
☐ Not Applicable

Zip **33873**

Country **HARDEE**

Zip **33873**

Country **HARDEE**

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

**GIBBS, HARRY D
 226 WEST MAIN STREET
 WAUCHULA FL 33873**

Name
HARRY D. GIBBS

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

765 N 6TH AVE

City **WAUCHULA FL** Zip Code **33873**

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 NAME STREET ADDRESS CITY-ST-ZIP	DP GIBBS, HARRY D 226 WEST MAIN STREET WAUCHULA FL 33873	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV GIBBS, DARRYL P 253 GEORGETOWN LOOP WAUCHULA FL 33873	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DTS GIBBS, CARLA A 226 WEST MAIN STREET WAUCHULA FL 33873	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

Harry D. Gibbs

HARRY D GIBBS

1-28-02

863-773-9547

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)