

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000107945

1. Entity Name  
GULF REGION A.F.S., INC.

**FILED**  
**Sep 19, 2000 8:00 am**  
**Secretary of State**

09-19-2000 90001 040 \*\*\*150.00

Principal Place of Business

4011 W. KENNEDY BLVD.  
TAMPA FL 33609

Mailing Address

4011 W. KENNEDY BLVD.  
TAMPA FL 33609

2. Principal Place of Business

3. Mailing Address

1611 W. PLATT STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State  
TAMPA FL

Zip

Country

Zip

Country

33606

4. FEI Number

59-3485359

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

GIBBS, B. GRAY  
100 SECOND AVENUE SOUTH  
SUITE 704  
ST. PETERSBURG FL 33701

Name

KEITH W. KOHLER CPA

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

1611 W. PLATT STREET

City

TAMPA

FL

Zip Code

33606

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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**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 P  
NAME LAWSON, LARRY  
STREET ADDRESS 17701 SHANNON OAKS COURT  
CITY-ST-ZIP TAMPA FL 33647

TITLE PD  
NAME LAWSON, LARRY  
STREET ADDRESS 3901 W. KENNEDY BLVD.  
CITY-ST-ZIP TAMPA, FL 33609

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)

Attachment Doc# P97000107945  
**KOEHLER & COMPANY**  
A PROFESSIONAL ASSOCIATION  
CERTIFIED PUBLIC ACCOUNTANTS AND BUSINESS ADVISORS  
40079566

MEMBERS OF THE AMERICAN  
INSTITUTE AND THE FLORIDA  
INSTITUTE OF CERTIFIED  
PUBLIC ACCOUNTANTS

TELEPHONE (813) 258-1272  
FACSIMILE (813) 258-2422  
WEB SITE: WWW.CPA-TAMPA.COM  
E-MAIL: KOEHLER@CPA-TAMPA.COM

August 5, 2000

Florida Department of State  
Division of Corporations  
P.O. Box 1500  
Tallahassee, Florida 32302-1500

Regarding: Gulf Region A.F.S., Inc.

To Whom it May Concern:

Enclosed please find a check payable to the Department of State for \$150.00 and Form 2000 Uniform Business Report for the above referenced corporation.

Please be advised that the above referenced corporation never received the original annual report and accordingly, should not be subject to the late fee. This statement should be sufficient to allow you to waive this late fee.

If you have any questions, please call me directly at (813) 258-1272.

Very Truly Yours,



Keith W. Koehler

cc: Gulf Region A.F.S., Inc.