

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000007178

1. Entity Name

GYROSCOPE COMMUNICATIONS, INC.

FILED
May 12, 2001 8:00 am
Secretary of State

05-12-2001 90060 015 ***150.00

Principal Place of Business

3748 NW 53 LN
GAINESVILLE FL 32653

Mailing Address

3748 NW 53 LN
GAINESVILLE FL 32653

2. Principal Place of Business

1026 NW 86th Terr

3. Mailing Address

1026 NW 86th Terr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Gainesville FL

City & State

Gainesville FL

Zip

32606

Country

USA

Zip

32606

Country

USA

6. Name and Address of Current Registered Agent

MCINNIS, KEITH E
3748 NW 53RD LANE
GAINESVILLE FL 32653

7. Name and Address of New Registered Agent

Name: Keith E McInnis

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

1026 NW 86th Terrace

City

Gainesville

FL

Zip Code
32606

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

Keith E McInnis
Signature, typed or printed name of registered agent and title if applicable.

President

(NOTE: Registered Agent signature required when reinstating)

04/17/2001
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

TITLE PD
NAME MCINNIS, KEITH E
STREET ADDRESS 3748 NW 53RD LANE
CITY-ST-ZIP GAINESVILLE FL 32653 ☐ Delete

TITLE VSTD
NAME MCINNIS, LEIANN B
STREET ADDRESS 3748 NW 53RD LANE
CITY-ST-ZIP GAINESVILLE FL 32653 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME Keith E McInnis
STREET ADDRESS 1026 NW 86th Terr
CITY-ST-ZIP Gainesville FL 32606 ☒ Change ☐ Addition

TITLE VSTD
NAME Leiann B McInnis
STREET ADDRESS 1026 NW 86th Terr
CITY-ST-ZIP Gainesville FL 32606 ☒ Change ☐ Addition

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

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

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

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/17/2001
Date

3523327929
Daytime Phone #

CR2E034 (10/00)