

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000036870

1. Entity Name

GOLDFISH GALLERIES, INC. *GOLD FISH GALLERIES, INC.*

**FILED**  
**Jan 30, 2001 8:00 am**  
**Secretary of State**

01-30-2001 90183 010 \*\*\*150.00

Principal Place of Business

322 S. WASHINGTON DRIVE  
SARASOTA FL 34239  
US

Mailing Address

P O BOX 19105  
SARASOTA FL 34236  
US

**C0012641**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

*1451 MAIN STREET*

3. Mailing Address

*1451 MAIN STREET*

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

*SARASOTA FL*

City & State

*SARASOTA FL*

4. FEI Number

*59-3506294*

Applied For

Not Applicable

Zip

Country

*34236*

*US*

Zip

Country

*34236*

*US*

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

BEATTIE, JOHN C JR  
322 S. WASHINGTON DRIVE  
SARASOTA FL 34239

7. Name and Address of New Registered Agent

Name *BEATTIE, JOHN C. JR.*

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

*1451 MAIN STREET*

City

*SARASOTA*

FL

Zip Code

*34236*

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 date 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

TITLE ☐ Delete  
NAME *D*  
STREET ADDRESS *BEATTIE, JOHN C JR*  
CITY-ST-ZIP *322 S. WASHINGTON DRIVE*  
*SARASOTA FL 34239*

TITLE ☐ Delete  
NAME *D*  
STREET ADDRESS *BEATTIE, TERRY E JR*  
CITY-ST-ZIP *322 S. WASHINGTON DRIVE*  
*SARASOTA FL 34239*

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS *1451 MAIN STREET*  
CITY-ST-ZIP *SARASOTA, FL 34236*

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS *1451 MAIN STREET*  
CITY-ST-ZIP *SARASOTA, FL 34236*

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

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

TITLE ☐ Change ☐ Addition  
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:

*John C. Beattie Jr* *John C. Beattie Jr Dir.*

Date

*1/22/01*

Daytime Phone #

*941-366-0088*

CR2E034 (10/00)