2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000044649

1. Entity Name
GILBILL, INC.

Principal Place of Business	Mailing Address
355 E. MONROE ST. JACKSONVILLE, FL 32202	355 E. MONROE ST. JACKSONVILLE, FL 32202

DO NOT WRITE IN THIS SPACE

03152004   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
59-3514584	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CLARKE, GILBERT R
355 E. MONROE ST.
JACKSONVILLE, FL 32202

DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

U00000090812
03/17/04-80034-006 150.00

10.   OFFICERS AND DIRECTORS

TITLE	D
NAME	CLARKE, GILBERT R
STREET ADDRESS	7630 W. WINDWARD WAY
CITY-ST-ZIP	JACKSONVILLE, FL 32256

TITLE	D
NAME	DYE, WILLIAM
STREET ADDRESS	109 N. LIBERTY ST.
CITY-ST-ZIP	JACKSONVILLE, FL 32202

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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STREET ADDRESS	
CITY-ST-ZIP	

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _Gilbert R. Clarke_ GILBERT R. CLARKE   Mar. 16, 2004   904-634-0000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #