

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 03, 2004 8:00 am**  
**Secretary of State**

05-03-2004 91219 018 \*\*\*150.00

**DOCUMENT # P98000068809**

1. Entity Name

**GEMS ENTERPRISES OF HERNANDO COUNTY, INC.**



Principal Place of Business

**3 CALENDULA CT. W.  
HOMOSASSA FL 34446**

Mailing Address

**3 CALENDULA CT. W.  
HOMOSASSA FL 34446**

**24066682**



MOORE CR2E034 (11/03)

2. Principal Place of Business

**5459 OAK RIDGER DRIVE**

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**HOMOSASSA, FL**

City & State

4. FEI Number

**59-3522613**

Applied For

Not Applicable

Zip

**34446**

Country

**CITRUS**

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**BORG, PATRICIA F  
3 CALENDULA CT. W.  
HOMOSASSA FL 34446**

7. Name and Address of New Registered Agent

Name

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

City

**FL**

Zip Code

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**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	BORG, PATRICIA F	
STREET ADDRESS	3 CALENDULA CT. W.	
CITY-ST-ZIP	HOMOSASSA FL 34446	
TITLE	D	<input type="checkbox"/> Delete
NAME	BORG, GREGORY P	
STREET ADDRESS	12971 KINGSDALE LANE	
CITY-ST-ZIP	WEST PALM BEACH FL 33414	
TITLE	D	<input type="checkbox"/> Delete
NAME	ARUNDELL, ELAINE MARIE	
STREET ADDRESS	2004 RIVER CROSSING DRIVE	
CITY-ST-ZIP	VALRICO FL 33594	
TITLE	D	<input type="checkbox"/> Delete
NAME	BORG, RICHARD J	
STREET ADDRESS	3 CALENDULA CT. W.	
CITY-ST-ZIP	HOMOSASSA FL 34446	
TITLE	D	<input type="checkbox"/> Delete
NAME	BORG, STEPHANIE ANN	
STREET ADDRESS	2130 FLETCHER POINT CIR.	
CITY-ST-ZIP	TAMPA FL 33613	
TITLE	D	<input type="checkbox"/> Delete
NAME	BORG, MICHAEL S	
STREET ADDRESS	13377 ASBURY ST.	
CITY-ST-ZIP	SPRING HILL FL 34609	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ARUNDELL, ELAINE MARIE	
STREET ADDRESS	2834 MOSSY TIMBER TRAIL	
CITY-ST-ZIP	VALRICO, FL 33594	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MC KIERNAN, STEPHANIE ANN	
STREET ADDRESS	12401 RUSTIC VIEW COURT	
CITY-ST-ZIP	TAMPA, FL 33635	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:** *Richard Borge* **RICHARD BORG V.P.** **2/26/04** **688-3608**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #