

FILED
May 21, 2001 8:00 am
Secretary of State

05-21-2001 90342 037 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P98000071122**

1. Entity Name

Florida G&P Sales, Inc.

Principal Place of Business Mailing Address
 4410 Plumosa Street 4410 Plumosa Street
 Spring Hill, FL Spring Hill, FL
 34607 34607

C0068563

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number

52-2119107

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐\$5.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Glen McCausland
 4410 Plumosa Street
 Spring Hill, FL 34608

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.

SIGNATURE

Signature, typed or printed name of registered agent and city if applicable

(NOTE: Registered Agent signature required when submitting)

DATE

9. This corporation is eligible to satisfy its intangible
 tax filing requirement and elects to do so.
 (See criteria on back) ☐

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** President ☐ Delete
 NAME **Glen McCausland**
 STREET ADDRESS **4410 Plumosa Street**
 CITY-ST-ZIP **Spring Hill, FL 34608**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
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TITLE ☐ Delete
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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)(f), 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, the empowered.

SIGNATURE: *Glen McCausland*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/26/2001

352-596-5587

Dated: 05/21/01

C0068563 (11/03)