

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000072286

1. Entity Name

GLOBAL GUARDIAN OF PINELLAS, INC.

FILED
Feb 01, 2001 8:00 am
Secretary of State

02-01-2001 90033 037 ***150.00

Principal Place of Business

18433 DRAYTON ST
BROOKSVILLE FL 34610

Mailing Address

18433 DRAYTON ST
BROOKSVILLE FL 34610

708656

2. Principal Place of Business

18433 DRAYTON ST.

3. Mailing Address

Suite, Apt. #, etc. Same



DO NOT WRITE IN THIS SPACE

City & State

Brooksville, FL.

City & State

4. FEI Number

59-3533586

Applied For

Not Applicable

Zip

34610

Country

FLA

Zip

Country

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LAMBERT, GERALD J
18433 DRAYTON ST
BROOKSVILLE FL 34610

7. Name and Address of New Registered Agent

Name

Gerald J. Lambert Jr

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

18433 Drayton St.

City

Brooksville

FL

Zip Code

34610

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

Gerald J. Lambert Jr

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1-26-01

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 ADAMS, CARL JR
CITY-ST-ZIP 1229 15TH STREET
PALM HARBOR FL 34683

TITLE ☐ Delete
NAME D
STREET ADDRESS LAMBERT, GERALD J JR
CITY-ST-ZIP 18433 DRAYTON ST
BROOKSVILLE FL 34610

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
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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-26-01

Date

813
(727) 218-3457

Daytime Phone #

CR2E034 (10/00)