

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000093730

1. Entity Name

GIGNAC CONSULTING, INC.

FILED
Aug 16, 2000 8:00 am
Secretary of State

08-16-2000 90008 025 ***558.75

Principal Place of Business

13924 85TH TERRACE NORTH
 SEMINOLE FL 33776

Mailing Address

13924 85TH TERRACE NORTH
 SEMINOLE FL 33776

2. Principal Place of Business

13924 85th Terr N.
 Suite, Apt. #, etc.

3. Mailing Address

13924 85th Terr. N.
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Seminole, FL

City & State

Seminole, FL

4. FEI Number

59-3542674

APPLIED FOR

Applied For

Not Applicable

Zip

33776

Country

Pine Hls

Zip

33776

Country

Pine Hls

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GIGNAC, RENE VINCENT JR.
 13924 85TH TERRACE NORTH
 SEMINOLE FL 33776

7. Name and Address of New Registered Agent

Name: Allison K. Gignac
 Street Address (P.O. Box Number is Not Acceptable): 13924 85th Terrace North
 City: Seminole FL Zip Code: 33776

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: Allison K. Gignac
Signature, typed or printed name of registered agent and title if applicable.

Allison K. Gignac
(NOTE: Registered Agent signature required when reinstating)

8/1/00
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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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: D
 NAME: GIGNAC, RENE VICENT
 STREET ADDRESS: 13924 85TH TERRACE NORTH
 CITY-ST-ZIP: SEMINOLE FL 33776 ☒ Delete

TITLE: ☐ Delete
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 CITY-ST-ZIP: ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: President
 NAME: Allison K. Gignac
 STREET ADDRESS: 13924 85th Terrace North
 CITY-ST-ZIP: Seminole, FL 33776 ☐ Change ☒ Addition

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

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:

Allison K. Gignac
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/1/00
 Date

727-397-4726
 Daytime Phone #

CR2E034 (5/00)