

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000063864

1. Entity Name
GTO, INC.

Principal Place of Business
3121 HARTSFIELD RD.
TALLAHASSEE FL 32303

Mailing Address
3121 HARTSFIELD RD.
TALLAHASSEE FL 32303

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3596645

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MITCHELL, CHARLES B III
3121 HARTSFIELD RD.
TALLAHASSEE FL 32303

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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 \$150.00
After May 1, 2002 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 P
NAME KELLEY, JOE
STREET ADDRESS 1212 CONSERVANCY DRIVE E
CITY-ST-ZIP TALLAHASSEE FL 32312 ☐ Delete

TITLE EVP
NAME PAYNE, WAYNE
STREET ADDRESS 26 GRETCHEN LANE
CITY-ST-ZIP SOPCHOPPY FL 32358 ☒ Delete

TITLE SRVP
NAME MITCHELL, JOHN P
STREET ADDRESS PO BOX 12194
CITY-ST-ZIP TALLAHASSEE FL 32317 ☐ Delete

TITLE S
NAME NOBLIN, MILLARD
STREET ADDRESS 1300 METROPOLITAN BLVD
CITY-ST-ZIP TALLAHASSEE FL 32308 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE C/D
NAME MITCHELL, CHARLES B III
STREET ADDRESS PO BOX 13708
CITY-ST-ZIP TALLAHASSEE FL 32317 ☐ Change ☒ Addition

TITLE V
NAME GREG MCELHALL, ADAM
STREET ADDRESS 1102 EVANMOE ROAD
CITY-ST-ZIP TALLAHASSEE FL 32312 ☐ Change ☒ Addition

TITLE C/D
NAME DESOTELL, BRIAN
STREET ADDRESS 3795 PATCH DRIVE
CITY-ST-ZIP TALLAHASSEE FL 32309 ☐ Change ☒ Addition

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

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

TITLE
NAME
STREET ADDRESS
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:

BRIAN DESOTELL C/D

Date

Daytime Phone #

FILED
Jan 11, 2002 8:00 am
Secretary of State

01-11-2002 90003 019 ***150.00



DO NOT WRITE IN THIS SPACE

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