	UNIFORM BUS		RT (UBR)		1607
DOCUMENT # 19900006 4146				FILED STATE	
1. Entity Name G & D 2000, Inc.				SECRETARY OF STATE NIVISIUM OF CORPORATIONS	
Principal Place of Business Mailing Address				00 OCT 25 PM 1: 03	
3883 Davis Blvd. Same					
	, Florida 34104				
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 65~0944683	Applied For Not Applicable
Zip	Country	Zip ·	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Regist	ered Agent
Coorgo Croonfield : -			Street Addres	orge Greenfield s (P.O. Box Number is Not Acceptable) 33-Davis Blvd.	
	. '		City	1	FL Zip Code 34104
. The shave	named antity submits this statement for	or the nurnose of changing it		ples stered agent, or both, in the State of Florida.	34104
9. This corpo	Signature, typed or printed name of registered agent ration is eligible to satisfy its Intangible equirement and elects to do so.	FILE NOW	TE Registered Agent signature required. [III] FEE IS \$150.00 000 Fee will be \$550.0 ble to Department of S	0	DATE 19 \$5.00 May Be, Added to Fees
11.	OFFICERS AND		12.	ADDITIONS/CHANGES TO OFFICER	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P, VP, S, T George Greenfield 1609 Outrigger Lan Naples, FL 34104	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1000034 -11/15/ ****15	
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indicated of the cor	on this report or supplemental report poration or the receiver or trustee empor or on an attachment with an address,	is true and accurate and that powered to execute this repor	my signature shall have to t as required by Chapter of d.	n Section 119.07(3)(i), Florida Statutes. I furth he same legal effect as if made under oath; 607, Florida Statutes; and that my name app Date	

dchard L. Swope, C.P.A. Jane E. Lamberson, C.P.A. Linda L. Guilkey, C.P.A. William J. O'Connor, C.P.A. Ronald K. Bailey, Jr., C.P.A. Richard T. Bendel, C.P.A. Charles E. Cannon, C.P.A.† Jodi L. Giles, C.P.A. William P. Gover, C.P.A C. David Lamberson, C.P.A.††

SWOPE

LAMBERSON. GUILKEY

& O'CONNOR, P.A.

Certified Public Accountants

American Instituti Certified Public Accountant Florida Institute of

Certified Public Accountants

 Licensed in Illinois and Florida ** Licensed in Ohio and Florida

† Licensed in Tennessee and Florida †† Licensed in Pennsylvania and Florida

September 12, 2000

Department of State P.O. Box 6327 Tallahassee, FL 32314

Attn: Division of Corporations

G & D 2000, Inc.

ID#: 65-0944683

Gentlemen:

The above mentioned taxpayer has requested my assistance in preserving their active status with the State of Florida. I am enclosing incorporating documents to assist in your review of this matter.

The taxpayer has not received a Uniform Business Report for the current year. The date of incorporation was July 20, 1999 as shown on the enclosed documents. Please check your records and make sure the correct mailing address is as follows:

> G & D 2000, Inc. 3883 Davis Blvd. Naples, FL 34104

I am enclosing a check for \$150 as payment for the current year and request a waiver of any late filing penalties because the annual report was sent to an incorrect address or not sent at all.

Your consideration is greatly appreciated in this matter.

Sincerely,

SWOPE, LAMBERSON, GUILKEY & O'CONNOR, P.A.

Jane E. Lamberson

Certified Public Accountant

JEL:aks Enclosures