

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90167 017 ***163.75

DOCUMENT # **P99000065230**

1. Entity Name

A-1 Gatehouse Security Inc.

DO NOT WRITE IN THIS SPACE

000004

2. Principal Place of Business

4720 SE 15th AVE

Suite, Apt. #, etc.

Ste. 211

City & State

Cape Coral, Florida

Zip

33904

Country

USA

3. Mailing Address

16711 Garden BLVD

Suite, Apt. #, etc.

City & State

Cape Coral, FL

Zip

33909

Country

USA

DO NOT WRITE IN THIS SPACE

4. FEI Number

05-0936889

Applied For

Not Applicable

5. Certificate of Status Desired

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\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

DIANE STANTIAL

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

4720 SE 15th AVE Ste. 211

City

Cape Coral

FL

Zip Code

33904

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

Diane C. Stantial

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

(NOTE: Registered Agent signature required when reinstating)

4/16/02

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.
(See criteria on back)

☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

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\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PRESIDENT
NAME	DIANE C. STANTIAL
STREET ADDRESS	4720 SE 15th AVE Ste. 211
CITY-ST-ZIP	Cape Coral, FL 33904
TITLE	Vice President
NAME	Karl E. Stantial (Karl E. Stantial)
STREET ADDRESS	4720 SE 15th AVE Ste. 211
CITY-ST-ZIP	Cape Coral, FL 33904
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
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CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Diane C. Stantial

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/02

DATE

941-530-2334

Daytime Phone #

CR2E034B (12/01)