## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

## **DOCUMENT #**

Principal Place of Business

605 N.W. 8TH AVENUE

GAINESVILLE FL 32601

P99000090272

Mailing Address

605 N.W. 8TH AVENUE

GAINESVILLE FL 32601

1. Entity Name

TG PROPERTIES OF NORTH FLORIDA, INC.



Apr 14, 2003 8:00 am Secretary of State
04-14-2003 90091 041 \*\*\*150.00 **FILED** 

04-14-2003 30031 041

						<b>       </b>			
2. Principal Place of Business		3. Mailing Address				<b>6</b> 01   101  <b> </b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES				
City & Sta	te	City & State			<b>4.</b> FEI Number <b>59-3605443</b>			oplied For ot Applicable	
Zip Country		Zip Cour			5. Certificate of Status Desired   \$8.75 Ar Fee Requirements				
	6Name and Address of Current	Registered Agent			7. Name and Address of New Re	gistered Ag	ent		
				Name					
Turbyfill, g e jr				Street Address (P.O. Box Number is Not Acceptable)					
605 NW 8TH AVE				The first state of the first sta					
GAINESV	ILLE FL 32601								
				у		FL	Zip Cod	е	
8. The above	named entity submits this statement for	or the purpose of changing i	its registered off	ice or registered	agent, or both, in the State of Flori	da. I am fan	niliar with,	and accept	
the obligation	tions of registered agent.								
SIGNATURE									
OlGIVĄTOTIE	Signature, typed or printed name of registered agent	and title if applicable. (No	OTE: Registered Agent	signature required wh	nen reinstating)	DATE			
F	ILE NOW!!! FEE IS \$150.00								
Afte	r May 1, 2003 Fee will be \$550.00		-		9. Election Campaign Fina			May Be	
Make Check	k Payable to Florida Department o	f State			Trust Fund Contribution.	. 🗀	Added	i to Fees	
10.	OFFICERS AND	DIRECTORS	11.	<del></del>	ADDITIONS/CHANGES TO OFFIC	CERS AND D	IRECTOR!	3 IN 11	
TITLE	P	☐ Delete	TITLE				Change	Addition	
NAME	TURBYFILL, G E JR		NAME	1			_ •		
STREET ADDRESS	605 NW 8TH AVENUE		STREET ADD	RESS					
CITY-ST-ZIP	GAINESVILLE FL 32601		CITY-ST-ZIF	·					
TITLE	VP	☐ Delete	TITLE				Change	☐ Addition	
NAME	GERDING, JULES		NAME						
STREET ADDRESS	605 NW 8TH AVENUE		STREET ADD	RESS					
CITY-ST-ZIP	GAINESVILLE FL 32601		CITY-ST-ZIF	1					
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STREET ADDRESS CITY-ST-ZIP			STREET ADDR	ESS					
			CITY-ST-ZIP						
<ol><li>I nereby c</li></ol>	ertify that the information supplied with	i this tiling does not qualify f	for the exemption	stated in Section	on 119.07/3Vi). Florida Statutos I fe	urther certify	that the in	formation i	

indicated on this report or supplied with this ining does not quality 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 10 or Block 11 if changed, or on an attachment with an address, with all other like impowered.

**SIGNATURE:** 

352-395-6480