

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

FILED
Jul 30, 2003 8:00 am
Secretary of State

07-30-2003 90069 031 ***150.00

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AN

DOCUMENT # P99000097786

1. Entity Name
PROGIFTS, INC.



Principal Place of Business
**4033 NW 97TH BLVD
SUITE A
GAINESVILLE FL 32606**

Mailing Address
**4033 NW 97TH BLVD
SUITE A
GAINESVILLE FL 32606**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3621543**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FARRELL, MELINDA C
4033 NW 97TH BLVD
SUITE A
GAINESVILLE FL 32606**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PRES
FARRELL, MELINDA C
4033 NW 97TH BLVD, STE A
GAINESVILLE FL 32606** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
FARRELL, JOHN
4033 NW 97TH BLVD, STE A
GAINESVILLE FL 32606** ☐ Delete

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

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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☐ Change ☐ Addition

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☐ Delete

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CITY-ST-ZIP
☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/28/03

CR2E034 (4/03)

Attachment#



Tournament Awards ~ Business Gifts ~ Promotional Products

86134436
P9900097786

4033 NW 97th Blvd.
Gainesville, FL 32606

Phone: 352.332.3833

Fax: 352.332.8252

ProGifts.com
Golf-Trophies.com

July 28, 2003

To Whom It May Concern:

Please accept the enclosed payment of \$150 for our 2003 Uniform Business Report. We received our first notice on 7/11/03, and per the instructions in the "Frequently Asked Questions" Section, are asking that the late fee be waived. We thank you for your time and consideration on this matter.

Sincerely,

John Farrell

A handwritten signature in black ink, appearing to be "John Farrell". The signature is written over the printed name and extends upwards and to the right.