

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 13, 2000 8:00 am
Secretary of State

09-13-2000 90044 001 ***558.75

00100100



DO NOT WRITE IN THIS SPACE

DOCUMENT # P99000104213

1. Entity Name
GKC HOLDINGS, INCORPORATED

Principal Place of Business
727 COLUMBUS DRIVE E.
TIERRA VERDE FL 33715

Mailing Address
727 COLUMBUS DRIVE E.
TIERRA VERDE FL 33715

2. Principal Place of Business
727 Columbus DR. E.
 Suite, Apt. #, etc.

3. Mailing Address
727 Columbus DR. E.
 Suite, Apt. #, etc.

City & State
TIERRA VERDE FL.
 Zip
33715
 Country
FLORIDA

City & State
TIERRA VERDE FL.
 Zip
33715
 Country
FLORIDA

4. FEI Number ☒ 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

CHUBBOY, GREGORY K
727 COLUMBUS DRIVE E.
TIERRA VERDE FL 33715

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	CHUBBOY, GREGORY K	
STREET ADDRESS	727 COLUMBUS DRIVE E.	
CITY-ST-ZIP	TIERRA VERDE FL 33715	
TITLE	TREASURER & Comptroller	<input type="checkbox"/> Delete
NAME	Julie McNeil	
STREET ADDRESS	2572 N. DEERWOOD DR.	
CITY-ST-ZIP	ATLANTA, GA 30327	
TITLE	V.P. OPERATIONS	<input type="checkbox"/> Delete
NAME	LAZARUS JAMES	
STREET ADDRESS	3306 TAMMANY AVE.	
CITY-ST-ZIP	TAMPA, FL 33610	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

08/30/00 727-867-2627

Date

Daytime Phone #

CR2E034 (5/00)