

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# V41461

FILED  
Jan 10, 2002 8:00 AM  
Secretary of State

Entity Name: GAE STEWART, INC.

**Current Principal Place of Business:**

1378 CLUBVIEW COURT  
VENICE, FL 34292

**New Principal Place of Business:**

**Current Mailing Address:**

1378 CLUBVIEW COURT  
VENICE, FL 34292

**New Mailing Address:**

FEI Number: 65-0335269

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SPANGLER, STEPHAN D  
1605 MAIN STREET  
#1100  
SARASOTA, FL 34236 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: STEWART, SHANE  
Address: 3090 SUNSET BEACH DR.  
City-St-Zip: VENICE, FL 34293

Title: ST ( ) Delete  
Name: DUDLEY, RONALD E  
Address: 1378 CLUBVIEW COURT  
City-St-Zip: VENICE, FL 34292

Title: PD ( ) Delete  
Name: STEWART, ALMA GAE,  
Address: 1378 CLUBVIEW COURT  
City-St-Zip: VENICE, FL 34292

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GAE STEWART

PD

01/10/2002

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date