

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000107966

FILED  
Apr 08, 2003  
Secretary of State

Entity Name: GORILLA REALTY MANAGEMENT CORPORATION

**Current Principal Place of Business:**

609 VIRGINIA DR.  
ORLANDO, FL 32803

**New Principal Place of Business:**

**Current Mailing Address:**

609 VIRGINIA DR.  
ORLANDO, FL 32803

**New Mailing Address:**

FEI Number: 59-3549335

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WEATHERFORD, WILLIAM P JR.  
1031 WEST MORSE BLVD., STE. 105  
WINTER PARK, FL 32789 US

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

WEATHERFORD, WILLIAM P JR.  
1150 LOUISIANA AVENUE  
SUITE 4  
WINTER PARK, FL 32789 US

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

04/08/2003

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: PENDERGRAFT, IV, JAMES S MD  
Address: 1103 LUCERNE TERR  
City-St-Zip: ORLANDO, FL 32806

Title: T (X) Delete  
Name: INEBNIT, ANDREW R  
Address: 1665 S. KIRKMAN RD.  
City-St-Zip: ORLANDO, FL 32811

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

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: JAMES S. PENDERGRAFT, MD

Electronic Signature of Signing Officer or Director

P

04/08/2003

Date