

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 189966

Entity Name: S. GARTNER & CO., INC.

FILED
Jan 21, 2005
Secretary of State

Current Principal Place of Business:

1249 W. DUVAL ST.
JACKSONVILLE, FL 32204 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2204
JACKSONVILLE, FL 322032204 US

New Mailing Address:

FEI Number: 59-0780277 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARTNER, BRIAN
1249 W DUVAL
JACKSONVILLE, FL 32204 US

Name and Address of New Registered Agent:

GARTNER, BRIAN
P.O. BOX 2204
JACKSONVILLE, FL 322032204 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

01/21/2005

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GARTNER, BRIAN L
Address: 1249 W DUVAL
City-St-Zip: JACKSONVILLE, FL 32204

Title: VD () Delete
Name: GARTNER, HARVEY J
Address: 1249 WEST DUVAL
City-St-Zip: JACKSONVILLE, FL 32204

Title: TD () Delete
Name: GINSBERG, LINDA G
Address: 1249 WEST DUVAL
City-St-Zip: JACKSONVILLE, FL 32204

Title: CSTD () Delete
Name: GARTNER, BRIAN L
Address: 1249 WEST DUVAL
City-St-Zip: JACKSONVILLE, FL 32204

Title: SD (X) Delete
Name: WATZMAN, KAREN G
Address: 1249 WEST DUVAL
City-St-Zip: JACKSONVILLE, FL 32204

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPD (X) Change () Addition
Name: GARTNER, BRIAN L
Address: P.O. BOX 2204
City-St-Zip: JACKSONVILLE, FL 322032204

Title: V (X) Change () Addition
Name: GARTNER, MICHAEL S
Address: P.O. BOX 2204
City-St-Zip: JACKSONVILLE, FL 322032204

Title: TD (X) Change () Addition
Name: GINSBERG, LINDA G
Address: P.O. BOX 2204
City-St-Zip: JACKSONVILLE, FL 322032204

Title: SD (X) Change () Addition
Name: WATZMAN, KAREN G
Address: P.O. BOX 2204
City-St-Zip: JACKSONVILLE, FL 322032204

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: BRIAN GARTNER

Electronic Signature of Signing Officer or Director

CPD

01/21/2005

Date