

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 23, 2004 8:00 am
Secretary of State

02-23-2004 90016 041 ***150.00

DOCUMENT # P02000036925

1. Entity Name
G & J RENTALS, INC.



Principal Place of Business

**613 CORBEL DRIVE
NAPLES, FL 34110**

Mailing Address

**613 CORBEL DRIVE
NAPLES, FL 34110**

44011310



01072004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
02-0619071

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**DAVENPORT, JEFFREY E
19301 IMMOKALEE ROAD
NAPLES, FL 34120**

**DO NOT WRITE
IN THIS SPACE**

18. 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 \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	DAVENPORT, NORMAN G
STREET ADDRESS	613 CORBEL DRIVE
CITY - ST - ZIP	NAPLES, FL 34110
TITLE	VSTD
NAME	DAVENPORT, JEFFREY E
STREET ADDRESS	613 CORBEL DRIVE
CITY - ST - ZIP	NAPLES, FL 34110
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #