

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 13, 2006 8:00 am
Secretary of State

03-13-2006 90067 040 ***150.00

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1. Entity Name
GENEER CORPORATION



Principal Place of Business
**322 E. CENTRAL BLVD., STE. 1510
ORLANDO, FL 32801**

Mailing Address
**322 E. CENTRAL BLVD., STE. 1510
ORLANDO, FL 32801**

40029285



01032006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-1237626

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**SPEER, SYDNEY
322 E. CENTRAL BLVD., STE. 1510
ORLANDO, FL 32801**

**DO NOT WRITE
IN THIS SPACE**

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. 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, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	DPT
NAME	GENESKY, BRIAN
STREET ADDRESS	322 E. CENTRAL BLVD., STE. 1510
CITY-ST-ZIP	ORLANDO, FL 32801
TITLE	DVPS
NAME	SPEER, SYDNEY
STREET ADDRESS	322 E. CENTRAL BLVD., STE. 1510
CITY-ST-ZIP	ORLANDO, FL 32801
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 exemptions contained in Chapter 119, 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: *SYDNEY A. SPEER* **SYDNEY A. SPEER Vice-President** 3/3/06 407-375-2673
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #