

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 16, 2007 08:00 A
Secretary of State

DOCUMENT # P04000144167

1. Entity Name
GOLDEN SPIKE COMBINATION CATERING, INC.



Principal Place of Business
**1971 NE 32ND ST.
LIGHTHOUSE POINT, FL 33064**

Mailing Address
**1971 NE 32ND ST.
LIGHTHOUSE POINT, FL 33064**



03072007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-1830602	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**GARNEAU, JOHN
1971 NE 32ND ST.
LIGHTHOUSE POINT, FL 33064**

**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, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U000000669191
03/27/07-80063-002 150.00

10. OFFICERS AND DIRECTORS

TITLE	PSTD
NAME	GARNEAU, JOHN
STREET ADDRESS	1971 NE 32ND ST.
CITY-ST-ZIP	LIGHTHOUSE POINT, FL 33064

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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:

John Garneau
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John Garneau 3/14/07
Date

954-946-8349
Daytime Phone #