

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 504248

**FILED**  
**Jan 29, 2013**  
**Secretary of State**  
**CC2179656292**

**Entity Name:** GEARY DESIGN, INC.

**Current Principal Place of Business:**

C/O RICHARD F. GEARY III  
4646 DOMESTIC AVE #102  
NAPLES, FL 34104

**Current Mailing Address:**

C/O RICHARD F. GEARY III  
4646 DOMESTIC AVE #102  
NAPLES, FL 34104 US

**FEI Number:** 59-1672274

**Certificate of Status Desired:** No

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

GEARY, RICHARD F. III  
4646 DOMESTIC AVE  
#102  
NAPLES, FL 34104 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

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title DPT  
Name GEARY, RICHARD F. III  
Address 4646 DOMESTIC AVE #102  
City-State-Zip: NAPLES FL 34104

Title DS  
Name GEARY, GAIL R.  
Address 4646 DOMESTIC AVE #102  
City-State-Zip: NAPLES FL 34104

Title AS  
Name DAFFRON, TAMMY  
Address 4646 DOMESTIC AVE # 102  
City-State-Zip: NAPLES FL 34104

*I hereby 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 all other like empowered.*

**SIGNATURE:** TAMMY DAFFRON

AS

01/29/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date