

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000031603

**Entity Name:** GARY GERRARD, P.A.

**Current Principal Place of Business:**

219 S. GILMER STREET  
LEXINGTON, GA 30648

**Current Mailing Address:**

P O BOX 542  
LEXINGTON, GA 30648 US

**FEI Number:** 65-0407128

**Certificate of Status Desired:** No

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

FREIDIN, PHILIP  
2 BISCAYNE BLVD  
SUITE 3100, 1 BISCAYNE TOWER  
MIAMI, FL 33130 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 DPST  
Name GERRARD, GARY  
Address P O BOX 542-219 S. GILMER STREET  
City-State-Zip: LEXINGTON GA 30648

*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:** GARY GERRARD

**PRESIDENT**

**01/15/2018**

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

\_\_\_\_\_  
Date