

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 20, 2005 08:00 AM
Secretary of State**

DOCUMENT # 292077

**1. Entity Name
GARMANN CORP.**



**Principal Place of Business
2947 HANSON STREET
FORT MYERS, FL 33916**

**Mailing Address
2947 HANSON STREET
FORT MYERS, FL 33916**



01152005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

**4. FEI Number
59-1091081**

**Applied For
Not Applicable**

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

6. Name and Address of Current Registered Agent

**MORRIS, MARY JANE
1244 WALDEN DR.
FORT MYERS, FL 33901**

**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, 2005 Fee will be \$550.00**

**9. Election Campaign Financing
Trust Fund Contribution. ☐**

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTD
MORRIS, MARY JANE
2947 HANSON ST
FT MYERS, FL 33916**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
WELCH, JULIE M
2947 HANSON ST
FT MYERS, FL 33916**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
HERMANN, DAVID G
2947 HANSON ST.
FOR MYERS, FL 33916**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
HERMANN, ERIC R
2947 HANSON ST
FORT MYERS, FL 33916**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
MORRIS, JULIUS T
2947 HANSON ST
FORT MYERS, FL 33916**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**DO NOT WRITE
IN THIS SPACE**

1100000186656
01/21/05-80066-006 150.00

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

Mary Jane Morris

1-15-05

239-332-1595