

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 19, 2007 08:00 AM
Secretary of State

DOCUMENT # 310160

1. Entity Name
GORDON ENGINEERING ASSOCIATES, INC.



Principal Place of Business
15570 SE 138TH TERR
P.O. BOX 707
WEIRSDALE, FL 32195-0707 US

Mailing Address
P.O. BOX 707
WEIRSDALE, FL 32195-0707 US



01022007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1150184

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

VARNADORE, THERESA A
1840 NE 61ST PL
OCALA, FL 34479

**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 Archie W. Gordon, Pres. ARCHIE W. GORDON, PRES. 01/16/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) 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**

10. OFFICERS AND DIRECTORS

TITLE VPD
NAME GORDON, MARY W.
STREET ADDRESS 15570 SE 138 TERR, PO BOX 707
CITY-ST-ZIP WEIRSDALE, FL 32195707

TITLE VD
NAME STRICKLAND, THOMAS C.
STREET ADDRESS RT 1 BOX 594
CITY-ST-ZIP ANTHONY, FL

TITLE SD
NAME VARNADORE, THERESA A
STREET ADDRESS 1840 NE 61ST PLACE
CITY-ST-ZIP OCALA, FL 34479

TITLE P
NAME GORDON, ARCHIE W
STREET ADDRESS 15570 SE 138 TERR, PO BOX 707
CITY-ST-ZIP WEIRSDALE, FL 321950707

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000592843
01/22/07-80008-008 158.75

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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: Archie W. Gordon, Pres ARCHIE W. GORDON, PRES 01/16/07 (352) 821-3120
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #