2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 21, 2008 08:00 A Secretary of State

Applied For

ANNUAL REPORT						
DOCUMENT # 608316 1. Entity Name G.R. BARBATO AND CO., INC.						
Principal Place of Business 2000 FLORIDA MANGO RD SUITE 103 WEST PALM BEACH, FL 33409 US	Mailing Address P.O. BOX 28 PALM BEACH, FL 33480	US				
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04112008	No Cha-P	CR2E034 (11/05)	

59-1885303 Not Applicable

5. Certificate of Status Desired Status Desired Fee Required

APRIL 15 2008 5U1-684-0089

5. Name and Address of Current Registered Agent

BARBATO, GENE R 1280 N. LAKE WAY PALM BCH, FL 33480

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4. FEI Number

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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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
		\$5.00 May Be Added to Fees	U00000912539 05/07/08-80084-011-150:nn			
10.	OFFICERS AND DIREC	CTORS			, היים נים 19-100-2002 - 20 יים ניכם	
NAME STREET ADDRESS CITY-ST-ZIP	PD BARBATO, GENE R 1280 N. LAKE WAY PALM BCH., FL					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CONROY, JANICE 266 COLONIAL LANE PALM BEACH, FL 33480					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CONROY, FRANCIS P 286 COLONIAL LN PALM BEACH, FL 33480		DO NOT WRITE IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-2/P	D BARBATO, EUGENE R. JR. 22 OAKENCROFT ROAD WELLESLEY, MA 02482					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE		•				
NAME						
STREET ADDRESS						
CITY-ST-ZIP						
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.						

ale/Gene P BARBATO