



**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # 634724 1. Entity Name H. GEARL GORE, INC.			
Principal Place of Business 810 SATURN ST #28 JUPITER, FL 33477 US		Mailing Address 810 SATURN ST #28 JUPITER, FL 33477 US	
DO NOT WRITE IN THIS SPACE			
		 04272004 No Chg-P CR2E034 (10/03)	
4. FEI Number 59-2140230		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GORE, H. GEARL 810 SATURN ST SUITE #28 JUPITER, FL 33477		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		UG00000154658 05/05/04-000000-001 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GORE, H. GEARL 610 XANADU PLACE JUPITER, FL		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST GORE, LINDA S 610 XANADU PLACE JUPITER, FL		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GORE, RICHARD 610 XANADU PLACE JUPITER, FL 33477		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: <u>Linda T. Gore</u> LINDA T. GORE		Date <u>4/26/04</u> Daytime Phone # <u>561-744-5522</u>	