FILED
Apr 19, 2006 08:00 AM
Secretary of State

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F05000000359

1. Entity Name
GENERAL ELEVATOR SALES AND SERVICE, INC.

Principal Place of Business	Mailing Address
767 FIFTH AVENUE, 48TH FLOOR NEW YORK, NY 10153	767 FIFTH AVENUE, 48TH FLOOR NEW YORK, NY 10153

DO NOT WRITE IN THIS SPACE

04062006 No Chg-P CR2E034 (11/05)

4. FEI Number
20-2104070
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	CP
NAME	BLOUNT, W. FRANK
STREET ADDRESS	1040 STOVALL AVE NE8TH FLOOR
CITY-ST-ZIP	ATLANTA, GA 30319
TITLE	VC
NAME	BUTLER, DAVID M
STREET ADDRESS	767 FIFTH AVENUE, 48TH FLOOR
CITY-ST-ZIP	NEW YORK, NY 10153
TITLE	D
NAME	QUINN, THOMAS H
STREET ADDRESS	1751 LAKE COOK ROAD, SUITE 550
CITY-ST-ZIP	DEERFIELD, IL 60015
TITLE	D
NAME	JORDAN, JOHN W II
STREET ADDRESS	875 N. MICHIGAN AVENUE, SUITE 4020
CITY-ST-ZIP	CHICAGO, IL 60611
TITLE	AS
NAME	FISHER, G. ROBERT
STREET ADDRESS	4520 MAIN STREET, SUITE 1100
CITY-ST-ZIP	KANSAS CITY, MO 64111
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/02/06-80103-003 150.00

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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: _____ 7 April 2006 404 396 9832
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #