

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**

**Jan 07, 2005 08:00 AM  
Secretary of State**

**DOCUMENT # G30338**

1. Entity Name  
**GENRESCO, INC.**



Principal Place of Business  
**C/O DAVID O. HAMRICK  
7303 18TH AVENUE N.W.  
BRADENTON, FL 34209**

Mailing Address  
**C/O DAVID O. HAMRICK  
7303 18TH AVENUE N.W.  
BRADENTON, FL 34209**



01032005 No Chg-P CR2E034 (10/03)

4. FEI Number  
**59-2273496**

Applied For  
Not Applicable

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

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

**HAMRICK, DAVID O.  
7303 18TH AVENUE N.W.  
BRADENTON, FL 33529**

**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 reappointing)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$350.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**10. OFFICERS AND DIRECTORS**

TITLE	SD
NAME	HAMRICK, DAVID
STREET ADDRESS	7303 18TH AVE. N.W.
CITY-ST-ZIP	BRADENTON, FL
TITLE	PD
NAME	HAMRICK, ELIZABETH
STREET ADDRESS	7303 18TH AVE. N.W.
CITY-ST-ZIP	BRADENTON, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000173065  
01/07/05-80004-005 150.00

**DO NOT WRITE  
IN THIS SPACE**

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:**

*David O. Hamrick*

**DAVID O. HAMRICK**

**1-7-05 (941) 7927907**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #