

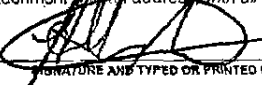


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 23, 2006 08:00 AM
Secretary of State

DOCUMENT # G32465 1. Entity Name GEARTNER ASSOCIATES, INC.				
Principal Place of Business 6728 EDGEWATER COMMERCE PARKWAY? ORLANDO, FL 32810		Mailing Address 6728 EDGEWATER COMMERCE PARKWAY? ORLANDO, FL 32810		
DO NOT WRITE IN THIS SPACE				
				 02092006 No Chg-P CR2E034 (11/05)
DO NOT WRITE IN THIS SPACE		4. FEL Number 59-2346122		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 GEARTNER, HILTON J 6728 EDGEWATER COMMERCE PARKWAY ORLANDO, FL 32810		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</small>		(NOTE: Registered Agent signature required when reappointing)		DATE _____
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 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		DO NOT WRITE IN THIS SPACE 000000444518 03/07/06-80004-014 150.00		
TITLE	PD			
NAME	GEARTNER, HILTON J			
STREET ADDRESS	6728 EDGEWATER COMMERCE PARKWAY			
CITY-ST-ZIP	ORLANDO, FL 32810			
TITLE				
NAME				
STREET ADDRESS				
CITY-ST-ZIP				
TITLE				
NAME				
STREET ADDRESS				
CITY-ST-ZIP				
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 to this report, with all other like empowered				
SIGNATURE: 		Hilton Geartner 2/20/06 407-447-6886		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>		