

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H85158

**FILED**  
**Apr 13, 2011**  
**Secretary of State**

**Entity Name:** GARRATT OF FORT MYERS INC.

**Current Principal Place of Business:**

DAVID GARRATT  
1708 SW 15TH AVE  
CAPE CORAL, FL 33914

**New Principal Place of Business:**

**Current Mailing Address:**

DAVID GARRATT  
1508 SW 15TH AVE  
CAPE CORAL, FL 33914

**New Mailing Address:**

**FEI Number:** 59-2604403

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DAVID GARRATT  
1508 SW 15TH AVE  
CAPE CORAL, FL 33914 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: STD  
Name: GARRATT, BARBARA A.  
Address: 1709 SW 15TH AVE  
City-St-Zip: CAPE CORAL, FL

Title: D  
Name: GARRATT, DAVID M.  
Address: 1709 S.W. 15TH AVENUE  
City-St-Zip: CAPE CORAL, FL

Title: D  
Name: GARRATT, ROBERT F.  
Address: 1709 S.W. 15TH AVENUE  
City-St-Zip: CAPE CORAL, FL

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: DAVID GARRATT

D

04/13/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date