

2004 FOR PROFIT CORPORATION ANNUAL REPORT

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

DOCUMENT # J68013	
1. Entity Name GENERAL MACHINE CO.	

Principal Place of Business 2271 WHITFIELD PARK AVENUE WHITFIELD INDUSTRIAL PARK SARASOTA, FL 34243	Mailing Address 2271 WHITFIELD PARK AVENUE WHITFIELD INDUSTRIAL PARK SARASOTA, FL 34243
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DO NOT WRITE IN THIS SPACE



04272004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2813042	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$0.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**WILSON, RICHARD
2271 WHITFIELD PARK AVENUE
WHITFIELD INDUSTRIAL PARK
SARASOTA, FL 34243**

**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 _____ (NOTE: Registered Agent signature required when registering) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WILSON, RICHARD 5207 MALAGA AVE. SARASOTA, FL 34235
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WILSON, BETTY 5207 MALAGA AVE. SARASOTA, FL 34235
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05/03/04-80041-013 150.00

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: Richard Wilson **4/27/04** **941-256-2815**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #