



2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2005 8:00 am
Secretary of State

03-16-2005 90042 029 ***158.75

DOCUMENT # L41041 1. Entity Name GARY MARKEL ENTERPRISES, INC.					
Principal Place of Business 1901 ULMERTON RD STE 700 CLEARWATER, FL 33762 US			Mailing Address 1910 ULMERTON ROAD STE 700 CLEARWATER, FL 33762 US		
2. Principal Place of Business 15950 BAY VISTA DRIVE Suite, Apt. #, etc. SUITE 250		3. Mailing Address 15950 BAY VISTA DR Suite, Apt. #, etc. SUITE 250			
City & State CLEARWATER, FL		City & State CLEARWATER, FL		03042005 Chg-P CR2E034 (10/03)	
Zip 33760		Country U.S.		4. FEI Number 59-2980099	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		Applied For Not Applicable			
6. Name and Address of Current Registered Agent MARKEL, GARY L. 1901 ULMERTON RD STE 700 CLEARWATER, FL 33762			7. Name and Address of New Registered Agent Name MARKEL, GARY L. Street Address (P.O. Box Number is Not Acceptable) 15950 BAY VISTA DRIVE, SUITE 250 City CLEARWATER FL Zip Code 33760		
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 reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MARKEL, GARY L. 1901 ULMERTON RD STE 700 CLEARWATER, FL 33762	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MARKEL, GARY L. 15950 BAY VISTA DRIVE, SUITE 250 CLEARWATER, FL 33760
<input type="checkbox"/> Change <input type="checkbox"/> Addition		<input type="checkbox"/> Change <input type="checkbox"/> Addition		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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: <u>Gary Markel</u> 3/14/05 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					