


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 16, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L95851</b>	
1. Entity Name <b>GENPART, INC.</b>	

Principal Place of Business <b>6784 NW 17TH AVENUE FT. LAUDERDALE, FL 33309</b>	Mailing Address <b>363 COWEE TUNNEL RD SYLVA, NC 28779 US</b>
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**DO NOT WRITE IN THIS SPACE**



01102005 No Chg-P CR2E034 (10/03)

4. FEI Number **65-0212647** Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

**SMITH, WAYNE M  
375 KATHY LANE  
MARGATE, FL 33068**

**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 reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, WAYNE M. 375 KATHY LANE MARGATE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT GARDNER, JENNIFER M. 363 COWEE TUNNEL RD SYLVA, NC
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP GARDNER, LAWRENCE R. 363 COWEE TUNNEL RD SYLVA, NC
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AUAIS, JOSE 8291 NW 167TH TERRACE HIALEAH, FL 33016
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

04/15/05-80063-018 150.00

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 changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE: JENNIFER M. GARDNER** April 14, 2005 (828) 586-1258