## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000111723

Entity Name: GFP EQUIPMENT CORPORATION

FILED Mar 21, 2005 Secretary of State

Current Pr	incipal Place o	of Business:	New Princ	New Principal Place of Business:		
2731 NW 4 GAINESVIL	1ST ST LE, FL 32606					
Current Mailing Address:			New Mailing Address:			
2731 NW 4 GAINESVIL	1ST ST LE, FL 32606					
FEI Number:	59-3693086	FEI Number Applied For ( )	FEI Number Not App	licable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Nam				ame and Address of New Registered Agent:		
BENCHIMOL, GEORGE M MD 2731 NW 41ST ST., STE B1 GAINESVILLE, FL 32606 US			2731 NW 4	LEYTEM, BRENT A MD 2731 NW 41ST ST., STE B1 GAINESVILLE, FL 32606 US		
The above in the State		ubmits this statement for the pur	rpose of changing	its registered of	ffice or registered agent, or both,	
SIGNATURE: BRENT A. LEYTEM, MD					03/21/2005	
	Electronic	Signature of Registered Agent	t		Date	
Election Cam	paign Financing	Trust Fund Contribution ( ).				
OFFICERS	AND DIRECT	ORS:	ADDITION	NS/CHANGES	TO OFFICERS AND DIRECTORS	
Title:		Delete	Title:		Change ( ) Addition	
Name:	BENCHIMOL, GE		Name:	( )	Shange ( ) / taution	
Address:	2731 NW 41ST S		Address:			
City-St-Zip:	GAINESVILLE, F	L 32606	City-St-Zip:			
Title:	. ,	Delete	Title:	( )	Change ( ) Addition	
Name:	BERK, JAMES W		Name:			
Address: City-St-Zip:	2731 NW 41ST S GAINESVILLE, F		Address: City-St-Zip:			
<b>,</b>	, ·					
Title:		Delete	Title: Name:		Change ( ) Addition	
Name: Address:	LEYTEM, B MD 2731 NW 41ST S	ST A-2	Address:	CARMICHAEL, I 2731 NW 41ST		
City-St-Zip:	GAINESVILLE, F		City-St-Zip:			
Title:	DVP ()[	Delete	Title:	()	Change ( ) Addition	
Name:	THOMPSON, DAY		Name:	( )	onango ( ) / nadition	
Address:	2731 NW 41ST S		Address:			
City-St-Zip:	GAINESVILLE, F	L 32606	City-St-Zip:			
Title:	D ()	Delete	Title:	( )	Change ( ) Addition	
Name:	SHANNON, KARE		Name:			
Address: City-St-Zip:	2731 NW 41ST S GAINESVILLE, F		Address: City-St-Zip:			
		N-1-4-			Ohaman ( ) Addition	
Title: Name:	D ()[ BRODSKY, HAL	Delete MD	Title: Name:	( )	Change ( ) Addition	
Address:	2731 NW 41ST S		Address:			
City-St-Zip:	GAINESVILLE, F		City-St-Zip:			

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GEORGE M. BENCHIMOL, MD DS 03/21/2005