

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P01000031615



1. Entity Name
G & S EXCAVATING INC.

Principal Place of Business
2893 N. 30TH AVE
MILTON, FL 32583

Mailing Address
2893 N. 30TH AVE
MILTON, FL 32583

FILED
Jun 28, 2006 08:00 AM
Secretary of State



06262006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3708766	Applied For Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

GOLL, JOCEILL C
2893 N. 30TH AVENUE
MILTON, FL 32583

**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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

U000000567709

06/28/06-R0003-006 150.00

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE P
NAME GOLL, JOCEILL
STREET ADDRESS 2893 N. 30TH AVE
CITY-ST-ZIP MILTON, FL 32583

TITLE V
NAME SNYDER, PHILIP A
STREET ADDRESS 8721 ROBIN WOOD CIRCLE
CITY-ST-ZIP MILTON, FL 32583

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *Jocell C. Hall* **Jocell C. Goll** **626-06 850-232-8258**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #