## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

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## **DOCUMENT # P01000040220**

Entity Name

GARNER COMPLETESITE, INC.



Principal Place of Business

s n

5115 N. SOCROM LOOP RD LAKELAND, FL 33809 **Mailing Address** 

PO BOX 889

AUBURNDALE, FL 33823-0889

## FILED Jan 10, 2006 8:00 am Secretary of State

01-10-2006 90027 002 \*\*\*158.75



01052006

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3723229

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GARNER, GERALD T 5115 N. SOCRUM RD LAKELAND, FL 33809

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<ol> <li>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.</li> </ol>					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE					
FILE NOWILL FEE IS \$150.00  After May 1, 2006 Fee will be \$550.00  9. Election Campaign Finance Trust Fund Contribution.				\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			<del></del>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST GARNER, GERALD T 5115 N SOCRUM LOOP RD LAKELAND, FL 33809				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GARNER, GERALD H. 4020 FUSSELL ROAD EAST POLK CITY, FL 33868				
TITLE NAME STREET ADDRESS CHY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
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.					