

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 02, 2006 8:00 am
Secretary of State

05-17-2006 90016 001 ***150.00
06-02-2006 90001 050 ***150.00

DOCUMENT # P01000047372

1. Entity Name
ILD, INC.



Principal Place of Business
3340 SCHERER DRIVE
SUITE 1
ST. PETERSBURG, FL 33716

Mailing Address
3340 SCHERER DRIVE
SUITE 1
ST. PETERSBURG, FL 33716

50020321



2. Principal Place of Business
3340 Scherer Drive

3. Mailing Address
3340 Scherer Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

05162006

Chg-P

CR2E034 (11/05)

City & State
St. Petersburg FL

City & State
St. Petersburg FL

4. FEI Number
59-3748491

Applied For
Not Applicable

Zip
33716

Country
Pinellas

Zip
33716

Country
Pinellas

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PEARSE, RICHARD L JR.
1239 S. MYRTLE AVENUE
CLEARWATER, FL 33756

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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)

DATE

FILE NOW!!! FEE IS \$550.00
Due by September 6, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$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
D
GEHRAND, WILLIAM A
2960 PHILIPPE PARKWAY
SAFETY HARBOR, FL 34695 ☐ Delete

TITLE
NAME
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CITY - ST - ZIP
☐ Change ☐ Addition

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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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WILLIAM A GEHRAND

Date

5/29/06 727 - 572-7080
Daytime Phone #