## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000014047

**Current Principal Place of Business:** 

Entity Name: GARY WEEKS, INC.

Feb 13, 2006 Secretary of State

2660 S.E. 28TH CIRCLE BOYNTON BEACH, FL			
Current Mailing Address:		New Mailing Address:	
2660 S.E. 28TH CIRCLE BOYNTON BEACH, FL			
FEI Number: 01-0584965	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:	
JOHN PORTER ACCOUNTING, INC. 400 S. FEDERAL HIGHWAY SUITE 405 BOYNTON BEACH, FL 33435 US		ACCARDISTANDLEELLC 2240 WOOLBRIGHT ROAD SUITE 317 BOYNTON BEACH, FL 33426 US	
The above named entity in the State of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,

**New Principal Place of Business:** 

Election Campaign Financing Trust Fund Contribution ( ).

( ) Delete

Electronic Signature of Registered Agent

## **OFFICERS AND DIRECTORS:**

Title:

SIGNATURE: ROBIN STANDLEE

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

02/13/2006

Date

() Change () Addition WEEKS, GARY Name: Name: 2660 S.E. 28TH CIRCLE 78A Address: Address: City-St-Zip: BOYNTON BEACH, FL 33435 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition LAGASSE, RICK Name: Name: WEEKS, DEBRA Address: Address: 1425 S.W. 28TH AVENUE 2660 S.E. 28TH CIRCLE 78A BOYNTON BEACH, FL 33426 BOYNTON BEACH, FL 33435 City-St-Zip: City-St-Zip: Title: Title: (X) Delete () Change () Addition Name: FAZZESE, VINNIE Name: 9086 EAST HIGHLAND PINES BLVD. Address: Address: City-St-Zip: PALM BEACH GARDENS, FL 33418 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: GARY WEEKS 02/13/2006 D