


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 31, 2006 08:00 AM
Secretary of State

| | | |
|--|----------------------------------|---|
| DOCUMENT # P02000045327 | |  |
| 1. Entity Name BILL GERRITY, INC. | | |
| Principal Place of Business 4420 NE 15TH AVENUE FORT LAUDERDALE, FL 33334 | | Mailing Address 4420 NE 15TH AVENUE FORT LAUDERDALE, FL 33334 |
| DO NOT WRITE IN THIS SPACE | | |
| 6. Name and Address of Current Registered Agent GERRITY, WILLIAM C JR 4420 NE 15TH AVENUE FORT LAUDERDALE, FL 33334 | | 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 _____ <small>Signature: typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____ | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
| 10. OFFICERS AND DIRECTORS | | DO NOT WRITE IN THIS SPACE |
| TITLE | D | |
| NAME | GERRITY, WILLIAM C JR | |
| STREET ADDRESS | 4420 NE 15TH AVENUE | |
| CITY-ST-ZIP | FORT LAUDERDALE, FL 33334 | |
| TITLE | | |
| NAME | | |
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| 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. | | |
| SIGNATURE: <u>X William C. Gerrity</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | | Date: <u>X 1/27/6</u> Daytime Phone #: <u>X 954-294-2900</u> |



01162006 No Chg-P CR2E034 (11/05)

4. FEI Number
73-1638539

Applied For
Not Applicable

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

110000410445
02/09/06-80035-016 150.00