

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2004 8:00 am
Secretary of State

04-22-2004 90044 044 ***150.00

DOCUMENT # P02000050988

1. Entity Name
GEE WHIZZ, INC.



Principal Place of Business
**3550 GUAVA STREET
COCOA, FL 32926**

Mailing Address
**3550 GUAVA STREET
COCOA, FL 32926**

94060407



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03052004

Chg-P

CR2E034 (10/03)

4. FEI Number
41-2040805

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**ALRON ENTERPRISES, INC.
390 NARRAGANSETT STREET NE
PALM BAY, FL 32907**

7. Name and Address of New Registered Agent

Name **Gerald L. Gehl**

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

3550 Guava Street

City **Cocoa**

FL

Zip Code **32926**

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

Gerald L. Gehl

Gerald L. Gehl, Reg. Agent 3/5/04

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME **D GEHL, GERALD L** ☐ Delete
STREET ADDRESS **3550 GUAVA STREET**
CITY-ST-ZIP **COCOA, FL 32926**

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME **D/P Gehl, Gerald L.** ☒ Change ☐ Addition
STREET ADDRESS **3550 Guava Street**
CITY-ST-ZIP **COCOA FL 32926**

TITLE
NAME **D/S/T Gehl, Hazel** ☐ Change ☒ Addition
STREET ADDRESS **355 Guava Street**
CITY-ST-ZIP **COCOA FL 32926**

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Gerald L. Gehl

Gerald Gehl, Pres. 3/5/04 (321) 631-7369

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #