


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

**FILED
Mar 24, 2006 08:00 AM
Secretary of State**

DOCUMENT # P02000110007
1. Entity Name
GREG HARTING INC.



Principal Place of Business Mailing Address
6230 FORESTWOOD DR. WEST 6230 FORESTWOOD DR. WEST
LAKELAND, FL 33811 LAKELAND, FL 33811

DO NOT WRITE IN THIS SPACE



01092006 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
02-0649508 Not Applicable

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

6. Name and Address of Current Registered Agent

HARTING, GREGORY
6230 FORESTWOOD DR. WEST
LAKELAND, FL 33811

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6. 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	HARTING, GREGORY T
STREET ADDRESS	6230 FORESTWOOD DR WEST
CITY-ST-ZIP	LAKELAND, FL 33811
TITLE	DS
NAME	HARTING, GAIL A
STREET ADDRESS	6230 FOESTWOOD DR. WEST
CITY-ST-ZIP	LAKELAND, FL 33811
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/10/06-80028-023 150.00

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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: Gregory Harting GREGORY HARTING 3-15-06 863-709-1620
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #