

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000005355

Entity Name: GATOR SCOOPS, INC.

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

1638 WEST UNIVERSITY AVE
GAINESVILLE, FL 32603 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 14602
GAINESVILLE, FL 32604 US

New Mailing Address:

FEI Number: 55-0819310

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILSON, GEOFFREY C
4510 NW 34TH DR
GAINESVILLE, FL 32605 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: GEOFFREY, WILSON
Address: 4510 NW 34TH DR
City-St-Zip: GAINESVILLE, FL 32605 US

Title: SD () Delete
Name: BISANZ, WILLIAM
Address: PO BOX 14602
City-St-Zip: GAINESVILLE, FL 32604 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GEOFFREY WILSON

PTD

04/29/2005

Electronic Signature of Signing Officer or Director

Date