

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

**FILED
Mar 18, 2005 8:00 am
Secretary of State**

03-18-2005 90068 030 ***150.00

DOCUMENT # P03000009905
1. Entity Name
DAVID GARNER'S CONSTRUCTION, INC.

DO NOT WRITE IN THIS SPACE

50027521

2. Principal Place of Business 750 Marlo Rd. Suite, Apt. #, etc.		3. Mailing Address 917 N. Palmway St. Suite, Apt. #, etc.	
City & State Kissimmee, FL		City & State Kissimmee, FL	
Zip 34744	Country	Zip 34744	Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 46-0518169	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name David Garner	
Street Address (P.O. Box Number is Not Acceptable) 750 Marlo Rd.	
City Kissimmee	FL Zip Code 34744

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 David Garner, Director/President 3/14/2005
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director/President David Garner 750 Marlo Rd. Kissimmee, FL 34744
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: David Garner David Garner, Director/President 3/14/2005 (407) 933-7779
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #