

2004 FOR PROFIT CORPORATION ANNUAL REPORT

09-08-2004 90121 049 ***158.75
P03000011849



FILED

04 OCT 25 PM 3:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



09012004 Chg-P CR2E034 (10/03)

DOCUMENT # P03000011849					
1. Entity Name BLUE GATOR TOOLS INC.					
Principal Place of Business 5827 WESTMONT ROAD MILTON, FL 32583 US			Mailing Address 5827 WESTMONT ROAD MILTON, FL 32583 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 343545578	
				Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BROWN, CORINNE J 5827 WESTMONT ROAD MILTON, FL 32583			7. Name and Address of New Registered Agent		
			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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: 			Date: Sept-1-04 1-850-8626-5688		
SIGNATURE AND TYPED OR PRINTED NAME OF GRADING OFFICER OR DIRECTOR			Daytime Phone #		

BLUE GATOR TOOLS, INC.

5827 Westmont Road
Milton, FL 32583
(850) 983-3111

October 20, 2004

Division of Corporations
P.O.Box 6198
Tallahassee, FL 32314-6198

Dear Friend,

In September we sent a check for The Annual Report Filing in the amount of \$158.75. Today we received a notice # P03000011849, stating "Certificate of Administrative Dissolution or Revocation".

We called your office to find out a letter was sent to us in September to notify me that a section on the Annual Report Form under Officers was not filled in. We never received this letter. Ivan came thru our area of Milton, Florida and our mail was disrupted.

According to your office personnel we were told to write this letter stating the following information:

Officer: Corinne J. Brown
Title: President
Address: 5827 Westmont Road, Milton, FL 32583

There is no other owner or officers than me.
Thank You for your attention to this matter.

Sincerely,

