

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

07-05-2005 90111 042 ***150.00

P03000090284

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 JUL 19 AM 11:16

DOCUMENT# P03000090284

1. Entity Name
ENTECH GA, INC.



Principal Place of Business
**9176 SMITH CREEK RD
TALLAHASSEE, FL 32310**

Mailing Address
**PO BOX 2130
TALLAHASSEE, FL 32316**

DO NOT WRITE IN THIS SPACE



06302005 No Chg-P CR2E034 (10/03)

4. FEI Number
20-0231812

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**JENKINS, ANDREA
2617 CHARLES MCINTOSH RD 3276 Rue De LaFitte
TALLAHASSEE, FL 32340 32312**

**DO NOT WRITE
IN THIS SPACE**

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 _____

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

(NOTE: Registered Agent signature required when re-registering)

DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$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

TITLE	P
NAME	JENKINS, ANDREA
STREET ADDRESS	9176 SMITH CREEK RD.
CITY-STATE-ZIP	TALLAHASSEE, FL 32316
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

Andrea Jenkins
Andrea Jenkins

6/20/05
Date

850-580-6022
Daytime Phone #