


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90539 026 ***158.75

DOCUMENT # P103 000 10 1497		
1. Entity Name <i>Gator Subs Inc</i>		

Principal Place of Business <i>PO Box 650131</i> <i>VERO BEACH, FL</i>	Mailing Address P.O. BOX 650131 VERO BEACH FL 32965
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



1st MOORE CR2E034 (10/04)

4. FEI Number <i>51-6481403</i>		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent <i>Schiefelbein, Nicholas R.</i> <i>995 CAROLINA CIRCLE SW</i> <i>VERO BEACH, FL 32962</i>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																	
<table border="1"> <tr> <td>NAME</td> <td><i>Nicholas R. Schiefelbein</i></td> <td><input type="checkbox"/> Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td><i>994 CAROLINA CIRCLE S.W.</i></td> <td></td> </tr> <tr> <td>CITY & STATE</td> <td><i>VERO BEACH, FL 32962</i></td> <td></td> </tr> </table>	NAME	<i>Nicholas R. Schiefelbein</i>	<input type="checkbox"/> Delete	STREET ADDRESS	<i>994 CAROLINA CIRCLE S.W.</i>		CITY & STATE	<i>VERO BEACH, FL 32962</i>		<table border="1"> <tr> <td>NAME</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY & STATE</td> <td></td> <td></td> </tr> </table>	NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS			CITY & STATE		
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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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Nicholas R. Schiefelbein *Nicholas R. Schiefelbein* 4/30/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

attachment

Gator Subs Inc.
PO Box 650131
Vero Beach, FL 32965

PO3000101447
50040475

April 27, 2005

Division of Corporations
Annual Report section
PO Box 6850
Tallahassee, FL 32314

Re: Annual Report 2005

Dear Madam/Sir:

We did not receive a copy of the above report and thus are submitting our copy and the annual fee of \$158.75. Thank You.

Sincerely,



Nicholas R. Schiefelbein
President