

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2006 8:00 am
Secretary of State

02-13-2006 90045 037 ***150.00

DOCUMENT # P03000129341

1. Entity Name
DENNIS GEYMAN'S GRADING INC.



Principal Place of Business
**12440 SE 142 CORUT
 OKLAWAHA, FL 32179**

Mailing Address
**P O BOX 1441
 OKLAWAHA, FL 32179**

2. Principal Place of Business
12440 SE 142ND COURT
 Suite, Apt. #, etc.

3. Mailing Address
P O Box 1441
 Suite, Apt. #, etc.



02032006 Chg-P CR2E034 (11/05)

City & State
OKLAWAHA, FL

City & State
OKLAWAHA, FL

Zip
32179

Country
US

Zip
32179

Country
US

4. FEI Number
41-2115973

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**GEYMAN,
 12440 SE 142 CORUT
 OKLAWAHA, FL 32179**

7. Name and Address of New Registered Agent

Name
GEYMAN, DENNIS

Street Address (P.O. Box Number is Not Acceptable)
12440 SE 142ND COURT

City
OKLAWAHA

State
FL

Zip Code
32179

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 reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2006 Fee will be \$550.00**

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	PD GEYMAN, DENNIS P O BOX 1441 OKLAWAHA, FL 32179	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GEYMAN, BRENDA P O BOX 1441 OKLAWAHA, FL 32179	<input type="checkbox"/> Delete
TITLE NAME STREET AD: CITY-ST-Z		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GEYMAN, DENNIS P O Box 1441 OKLAWAHA, FL 32179	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GEYMAN, BRENDA P O Box 1441 OKLAWAHA, FL 32179	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Dennis Geyman **2/10/06** **(352)-288-0948**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #