

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000135277

Entity Name: GARY B. HANSARD, INC.

FILED
Feb 21, 2007
Secretary of State

Current Principal Place of Business:

32 HUNTMASER CT.
ORMOND BEACH, FL 32174 US

New Principal Place of Business:

15 PRINCESS CIRCLE
ORMOND BEACH, FL 32174 US

Current Mailing Address:

32 HUNTMASER CT.
ORMOND BEACH, FL 32174 US

New Mailing Address:

15 PRINCESS CIRCLE
ORMOND BEACH, FL 32174 US

FEI Number: 20-0791246

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANSARD, GARY B
32 HUNTMASER CT.
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

HANSARD, GARY B
15 PRINCESS CIRCLE
ORMOND BEACH, FL 32174 US

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.

SIGNATURE: GARY B. HANSARD

02/21/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HANSARD, GARY B
Address: 32 HUNTMASER CT.
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: SEC () Delete
Name: HANSARD, CYNTHIA L
Address: 32 HUNTMASER CT.
City-St-Zip: ORMOND BEACH, FL 32174 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HANSARD, GARY B
Address: 15 PRINCESS CIRCLE
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: SEC (X) Change () Addition
Name: HANSARD, CYNTHIA L
Address: 15 PRINCESS CIRCLE
City-St-Zip: ORMOND BEACH, FL 32174 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GARY B. HANSARD

P

02/21/2007

Electronic Signature of Signing Officer or Director

Date