


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 15, 2006 8:00 am
Secretary of State

08-15-2006 90004 010 ***558.75

DOCUMENT # P03000135504					
1. Entity Name GERALD T. STRICKLAND ENTERPRISES, INC.					
Principal Place of Business 595 N. INDEPENDENCE HWY INVERNESS, FL 34453 US			Mailing Address P. O. BOX 1226 INVERNESS, FL 34451 US		
2. Principal Place of Business <i>595 N Independence Hwy</i>			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 20-0405879	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent STRICKLAND, GERALD T JR 595 N. INDEPENDENCE HWY INVERNESS, FL 34453			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 _____ <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 \$550.00 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D STRICKLAND, GERALD T JR 595 N INDEPENDENCE HWY INVERNESS, FL 34453	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/T STRICKLAND, LISA G 595 N INDEPENDENCE HWY INVERNESS, FL 34453	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	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: <i>Lisa Strickland</i>		V.P. Secretary/Treasurer <i>8/10/06 352-220-1262</i>			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #			

ATTACHMENT

40101640

P03000135504

To Whome it may Concern;

These are the copies
of Everything I sent
on 4-21-06 also the
Original Check I should
have sent but I left
for the copies as I
always makes copies for
my files of all that
I send to as well.

I Appreciate Anything that
you could do to help me
in anyway. It was
Truly an honest mistake and
I am sorry for any
& all inconvenience. Thank you
for your help.

ATTACHMENT

40101640

Divisions of Corporations
Annual Report Section
P.O. Box 6850
Tallahassee, FL 32314

Re: Document # PO 3000135504
Gerald T. Strickland Enterprises, Inc.
FEI Number 20-8405879
August 10, 2006

To Whom It May Concern:

On April 21, 2006 I sent our Corporate Annual Report by US Mail - Priority. I was in my office here at home working on the morning of May 1st, 2006 when I went to use my copier. Again I saw the check on the glass of my copier & I started to panic. Oh no, what to do so I picked up my phone & call you guys to see what to do. I do I called the number on the Report 850-245-6056 & spoke with some lady who I am sure was very busy because she rushed me right off the phone. She said ma'am no need to worry as far as we have your report filed on time & when we process it they will be making the money so not in shape & we go by Postmark so they will do a letter informing you that you →

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # **P03000135504**

1. Entity Name

GERALD T. STRICKLAND ENTERPRISES, INC.



ATTACHMENT

40101640

Principal Place of Business

595 N. INDEPENDENCE HWY
INVERNESS FL 34453
US

Mailing Address

P. O. BOX 1226
INVERNESS FL 34451
US

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 (10/05)

4. FEI Number

20-0405879

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STRICKLAND, GERALD T JR
595 N. INDEPENDENCE HWY
INVERNESS FL 34453

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

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

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P/D ☐ Delete
NAME STRICKLAND, GERALD T JR
STREET ADDRESS 595 N INDEPENDENCE HWY
CITY-ST-ZIP INVERNESS FL 34453

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S/T ☐ Delete
NAME STRICKLAND, LISA G
STREET ADDRESS 595 N INDEPENDENCE HWY
CITY-ST-ZIP INVERNESS FL 34453

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-21-06

352-220-1262

ATTACHMENT 40101640

P03800135504

To Whom It May Concern:

Here is the other
check along with annual
Report If you need to
process this one instead of
the other to have NO DELAYS
Thank you for your immediate
attention to this matter. ^{you}
Sincerely,
John H. Hines