



# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 16, 2006 8:00 am**  
**Secretary of State**

02-16-2006 90054 004 \*\*\*150.00

DOCUMENT # P04000015538					
<b>1. Entity Name</b> GAUNT ENTERPRISES, INC.					
<b>Principal Place of Business</b> 1111 CANAL ST THE VILLAGES, FL 32162			<b>Mailing Address</b> 1111 CANAL ST THE VILLAGES, FL 32162		
<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02142006    Chg-P    CR2E034 (11/05)	
City & State		City & State		<b>4. FEI Number</b> 41-2124356	
Zip		Country		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>  GAUNT, FLOYD E 11725 SW 72ND CIRCLE OCALA, FL 34476			<b>7. Name and Address of New Registered Agent</b> Name: GAUNT, FLOYD E. Street Address (P.O. Box Number is Not Acceptable): 6038 SPINNAKER LOOP City: LADY LAKE    FL    Zip Code: 32159		
<b>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.</b>  SIGNATURE: <i>Floyd E. Gaunt</i> DATE: 2/14/06 <small>(NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	GAUNT, FLOYD E		NAME		
STREET ADDRESS	11725 SW 72ND CIRCLE		STREET ADDRESS	6038 SPINNAKER LOOP	
CITY-ST-ZIP	OCALA, FL 34476		CITY-ST-ZIP	LADY LAKE, FL 32159	
TITLE	STD.	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	GAUNT, DANA		NAME		
STREET ADDRESS	11725 SW 72ND CIRCLE		STREET ADDRESS	6038 SPINNAKER LOOP	
CITY-ST-ZIP	OCALA, FL 34476		CITY-ST-ZIP	LADY LAKE, FL 32159	
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
<b>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.</b>					
SIGNATURE: <i>Floyd E. Gaunt</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			DATE: 2/14/06    DAYTIME PHONE: 352-751-6262		