2005 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # P04000058591 03-02-2005 90093 006 ***150.00 GATOR POWER LAWN SERVICE BY GUY SEARS INC. Principal Place of Business Mailing Address 5308 KERVIN ROAD 5308 KERVIN ROAD CRESTVIEW, FL 32539 CRESTVIEW, FL 32539 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/03) 01202005 Cha-P Applied For City & State City & State 4. FEINumber Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SEARS, GUY D Street Address (P.O. Box Number is Not Acceptable) 5308 KERVIN ROAD CRESTVIEW, FL 32539 City 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 SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Change Addition TITLE ☐ Delete TITLE SEARS, GUY D NAME STREET ADDRESS 5308 KERVIN ROAD STREET ADDRESS CITY-ST-ZIP CRESTVIEW, FL 32539 CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE SEARS, TODD A NAME NAME 5308 KERVIN ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CRESTVIEW, FL 32539 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition SEARS, TROY D NAME NAME STREET ADDRESS 5308 KERVIN ROAD STREET ADDRESS CITY - ST. ZIP CRESTVIEW, FL 32539 CITY-ST-7IP Addition Delete TITLE ☐ Change TITLE NAME HAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Change Addition ☐ Delete TITLE TOTAL NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

FILED

Mar 02, 2005 8:00 am

12. Thereby 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 tipe empowered.