

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 15, 2008 08:00 AM
Secretary of State

DOCUMENT # P04000058591

1. Entity Name

GATOR POWER LAWN SERVICE BY GUY SEARS INC.



Principal Place of Business

5308 KERVIN ROAD
CRESTVIEW, FL 32539

Mailing Address

5308 KERVIN ROAD
CRESTVIEW, FL 32539



03242008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1002425

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SEARS, GUY D
5308 KERVIN ROAD
CRESTVIEW, FL 32539

**DO NOT WRITE
IN THIS SPACE**

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, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME SEARS, GUY D
STREET ADDRESS 5308 KERVIN ROAD
CITY-ST-ZIP CRESTVIEW, FL 32539

TITLE VP
NAME SEARS, TODD A
STREET ADDRESS 5308 KERVIN ROAD
CITY-ST-ZIP CRESTVIEW, FL 32539

TITLE T
NAME SEARS, TROY D
STREET ADDRESS 5308 KERVIN ROAD
CITY-ST-ZIP CRESTVIEW, FL 32539

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000898317

04/25/08-80083-013 150.00

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IN THIS SPACE**

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:

Guy D. Sears GUY D. SEARS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9 APR 08

Date

(850) 582-6421

Daytime Phone #