

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000147588

FILED  
Feb 08, 2006  
Secretary of State

Entity Name: GARAGE OUTFITTERS OF SOUTHWEST FLORIDA, INC.

## Current Principal Place of Business:

9745 SEGUIN WAY  
FT MYERS, FL 33919

## New Principal Place of Business:

857 SE 47TH STREET  
CAPE CORAL, FL 33904

## Current Mailing Address:

9745 SEGUIN WAY  
FT MYERS, FL 33919

## New Mailing Address:

857 SE 47TH STREET  
CAPE CORAL, FL 33904

FEI Number: 20-1843338

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PILINGSRUD, BRUCE M  
1709 SE 41ST ST  
CAPE CORAL, FL 33904 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BAUMAN, ANDREW M  
Address: 9745 SEGUIN WAY  
City-St-Zip: FT MYERS, FL 33919

Title: STD ( ) Delete  
Name: JACOBSEN, JOHN R  
Address: 347 BAYSHORE DR  
City-St-Zip: CAPE CORAL, FL 33904

Title: VD (X) Delete  
Name: PILTINGSRUD, BRUCE M  
Address: 1709 SE 41ST ST  
City-St-Zip: CAPE CORAL, FL 33904

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: PILTINGSRUD, BRUCE M  
Address: 1709 SE 41ST STREET  
City-St-Zip: CAPE CORAL, FL 33904

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: BRUCE PILTINGSRUD

PD

02/08/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date