


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005 8:00 am
Secretary of State

04-27-2005 90290 041 ***150.00

DOCUMENT # P04000156131 1. Entity Name GUMBY'S WELDING INC.					
Principal Place of Business 3020 NAUTICAL WAY LAKE WORTH, FL 33462			Mailing Address 3020 NAUTICAL WAY LAKE WORTH, FL 33462		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 30-0291305	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
HALL IV, ROY A 3020 NAUTICAL WAY LAKE WORTH, FL 33462				Name NA 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 \$150.00 After May 1, 2005 Fee will be \$550.00		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	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME			NAME	PRESIDENT	
STREET ADDRESS			STREET ADDRESS	ROY A. HALL, IV	
CITY-ST-ZIP			CITY-ST-ZIP	3020 NAUTICAL WAY	
CITY-ST-ZIP			CITY-ST-ZIP	LAKE WORTH, FL 33462	
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME			NAME	SECRETARY	
STREET ADDRESS			STREET ADDRESS	ROY A. HALL, IV	
CITY-ST-ZIP			CITY-ST-ZIP	3020 NAUTICAL WAY	
CITY-ST-ZIP			CITY-ST-ZIP	LAKE WORTH, FL 33462	
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME			NAME	TREASURER	
STREET ADDRESS			STREET ADDRESS	ROY A. HALL, IV	
CITY-ST-ZIP			CITY-ST-ZIP	3020 NAUTICAL WAY	
CITY-ST-ZIP			CITY-ST-ZIP	LAKE WORTH, FL 33462	
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		
12. I hereby 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 like empowered.					
SIGNATURE: <i>Roy Hall IV</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			561 315-5967 04-19-05 <small>Date Daytime Phone #</small>		