

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000064572

Entity Name: KOLTON GARRETT, INC.

FILED  
Feb 09, 2007  
Secretary of State

## Current Principal Place of Business:

1136 BUENA VISTA CIRCLE  
PORT CHARLOTTE, FL 33953

## New Principal Place of Business:

1384 TREMONT TERRACE  
PORT CHARLOTTE, FL 33953

## Current Mailing Address:

1136 BUENA VISTA CIRCLE  
PORT CHARLOTTE, FL 33953

## New Mailing Address:

1384 TREMONT TERRACE  
PORT CHARLOTTE, FL 33953

FEI Number: 20-2945209

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILSON, MICHAEL M  
17801 MURDOCK CIRCLE, SUITE A  
PORT CHARLOTTE, FL 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: DPST ( ) Delete  
Name: REEVES, KARL G  
Address: 1136 BUENA VISTA CIRCLE  
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: DV ( ) Delete  
Name: STEINACKER, GREGG  
Address: 1136 BUENA VISTA CIRCLE  
City-St-Zip: PORT CHARLOTTE, FL 33953

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change ( ) Addition  
Name: REEVES, KARL G  
Address: 1384 TREMONT TERRACE  
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: DV (X) Change ( ) Addition  
Name: STEINACKER, GREGG  
Address: 1384 TREMONT TERRACE  
City-St-Zip: PORT CHARLOTTE, FL 33953

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: KARL G. REEVES

DPST

02/09/2007

Electronic Signature of Signing Officer or Director

Date