



2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000138814 1. Entity Name GARRITY MAINTENANCE AND REPAIR INC				07 MAY 25 AM 9:42 TALLAHASSEE, FLORIDA 	
Principal Place of Business 19806 NORTH WEST 20TH AVE NEWBERRY, FL 32669		Mailing Address 19806 NORTH WEST 20TH AVE NEWBERRY, FL 32669		05212007 Chg-P CR2E034 (12/06)	
2. Principal Place of Business - No P.O. Box # 19810 NW. 20th Avenue Suite, Apt. #, etc.		3. Mailing Address 19810 NW 20th Ave Suite, Apt. #, etc.			
City & State Newberry FL Zip 32669 Country		City & State Newberry, FL 32669 Zip 32669 Country			
4. FEI Number 20-3599108		Applied For <input type="checkbox"/> Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BARNES, SHERRIE J 2629 BLAIR STONE ROAD TALLAHASSEE, FL 32301		7. Name and Address of New Registered Agent Name 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 <u>Sherrie J. Barnes.</u> DATE <u>5-21-07</u> <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 Due by September 14, 2007		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 NAME STREET ADDRESS CITY-ST-ZIP	P GARRITY, JOSEPH 19806 NORTH WEST 20TH AVE NEWBERRY, FL 32669	<input type="checkbox"/> Delete			
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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: <u>Joseph Garrit</u> DATE <u>5-23-07</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		