


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2007 08:00 A
Secretary of State

DOCUMENT # P05000140799 1. Entity Name GARRATT & PAIGE SUB'S INCORPORATED	
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Principal Place of Business 1709 SW 15TH AVE CAPE CORAL, FL 33991	Mailing Address 1709 SW 15TH AVE CAPE CORAL, FL 33991
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DO NOT WRITE IN THIS SPACE



03282007 No Chg-P CR2E034 (11/05)

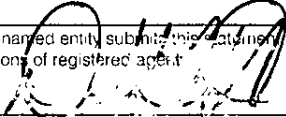
4. FEI Number 77-0661183	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**GARRATT, DAVID
1709 SW 15TH AVE
CAPE CORAL, FL 33991**

**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  (NOTE: Registered Agent signature required when reinstating) DATE **4/23/07**

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GARRATT, DAVID 1709 SW 15TH AVE CAPE CORAL, FL 33991
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GARRATT, ROBERT 4131 GUNNISON - # 1021 FT MYERS, FL 33928
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST PAIGE, BRETT 9009 IRVING RD FT MYERS, FL 33912
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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05/15/07-80157-016 150.00

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:  **DAVID GARRATT** **4/26/07**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #