

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000146949

Entity Name: GATOR WHOLESAL, INC

FILED  
Apr 25, 2007  
Secretary of State

**Current Principal Place of Business:**

5 WILLARD DRIVE  
#257  
ST AUGUSTINE, FL 32086

**New Principal Place of Business:**

**Current Mailing Address:**

4978 CYPRESS LINKS BLVD  
ELKTON, FL 32033

**New Mailing Address:**

FEI Number: 59-3820351

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MOOREHOUSE, LILY  
5 WILLARD DRIVE  
#257  
ST AUGUSTINE, FL 32086 US

**Name and Address of New Registered Agent:**

BAXTER, LILIANA  
4978 CYPRESS LINKS BLVD  
ELKTON, FL 32033 US

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: LILIANA L. BAXTER

04/25/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P,S ( ) Delete  
Name: MOOREHOUSE, LILY  
Address: 4978 CYPRESS LINKS BLVD  
City-St-Zip: ELKTON, FL 32033

Title: VP,T ( ) Delete  
Name: MOOREHOUSE, LILY  
Address: 4978 CYPRESS LINKS BLVD  
City-St-Zip: ELKTON, FL 32033

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P,S (X) Change ( ) Addition  
Name: BAXTER, LILIANA  
Address: 4978 CYPRESS LINKS BLVD  
City-St-Zip: ELKTON, FL 32033

Title: VP,T (X) Change ( ) Addition  
Name: BAXTER, LILIANA  
Address: 4978 CYPRESS LINKS BLVD  
City-St-Zip: ELKTON, FL 32033

I hereby certify that the information supplied with this filing does not qualify 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: LILIANA L. BAXTER

P

04/25/2007

Electronic Signature of Signing Officer or Director

Date