

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2006 8:00 am
Secretary of State

02-15-2006 90030 008 ***150.00

DOCUMENT #P05000147512					
1. Entity Name GPJ EXCAVATING INC.					
Principal Place of Business 4733 WESTERLY DRIVE NEW PORT RICHEY, FL 34653			Mailing Address 4733 WESTERLY DRIVE NEW PORT RICHEY, FL 34653		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	02122006 Chg-P CR2E034 (11/05)	
4. FEI Number 03-0573779				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ERASMUS, GERHARDUS P 4733 WESTERLY DRIVE NEW PORT RICHEY, FL 34653			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 _____ DATE <u>02/26/06</u> Signature, typed or printed, of the registered agent and title if applicable. (NOTE: Registered Agent signature required when renouncing)					
FILE NOW! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$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 ERASMUS, GERHARDUS P 4733 WESTERLY DRIVE NEW PORT RICHEY, FL 34653	☐ 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: _____ DATE <u>02/26/06</u> Daytime Phone # _____		