

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000163748

Entity Name: GARY B. PHILIPS INCORPORATED

FILED
Sep 04, 2006
Secretary of State

Current Principal Place of Business:

30 WESTLEE LN
PALM COAST, FL 32164

New Principal Place of Business:

Current Mailing Address:

30 WESTLEE LN
PALM COAST, FL 32164

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PHILIPS, CONSTANCE J
30 WESTLEE LN
PALM COAST, FL 32164 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Change (X) Addition
Name: PHILIPS, GARY B
Address: 30 WESTLEE LANE
City-St-Zip: PALM COAST, FL 32164

Title: SECY () Change (X) Addition
Name: PHILIPS, CONSTANCE J
Address: 30 WESTLEE LANE
City-St-Zip: PALM COAST, FL 32164

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: CONSTANCE J. PHILIPS

SECY

09/04/2006

Electronic Signature of Signing Officer or Director

_____ Date