## 1 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P06000041645

1. Entity Name

GARDNER KEATON, INC.



Apr 07, 2008 08:00 A Secretary of State

Principal Place of Business

Mailing Address

3536 EAST FOREST LAKE DR. SARASOTA, FL 34232 3536 EAST FOREST LAKE DR. SARASOTA, FL 34232



## DO NOT WRITE IN THIS SPACE

01262008 No Chg-P CR2E034 (11/05)

 4. FEI Number
 Applied For

 51-0279492
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

**FILED** 

6. Name and Address of Current Registered Agent

GARDNER-KEATON, HILARY 3536 EAST FOREST LAKE DR. SARASOTA, FL. 34232

## 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					
FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financ Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	U00000885200 04/18/08-80004-012 150 00
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KEATON, JAMES 3536 EAST FOREST LAKE DR. SARASOTA, FL 34232				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST GARDNER-KEATON, HILARY 3536 EAST FOREST LAKE DR. SARASOTA, FL. 34232				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
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					

12. I hereby certify that the information supplied with this filling 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: 11/M////

URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04.04.08

9419247216

Daytime Phone #