

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Sep 09, 2008 8:00 am**  
**Secretary of State**

09-09-2008 90001 003 \*\*\*150.00

**DOCUMENT # P06000060282**

1. Entity Name  
**GIBBS DEBRIS REMOVAL, INC.**



Principal Place of Business  
**20129 S.W. 86TH STREET  
DUNNELLON, FL 34431 US**

Mailing Address  
**20129 S.W. 86TH STREET  
DUNNELLON, FL 34431 US**

**DO NOT WRITE IN THIS SPACE**



09012008 No Chg-P CR2E034 (11/05)

4. FEI Number  
**20-4774599**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**GIBBS, LUKE G  
20129 S.W. 86TH STREET  
DUNNELLON, FL 34431**

**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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
Due by September 12, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

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

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
GIBBS, LUKE G  
20129 S.W. 86TH STREET  
DUNNELLON, FL 34431**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

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IN THIS SPACE**

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:**

*Luke Gibbs*  
**Luke Gibbs**

**9-7-08**

Date

**352-572-0975**

Daytime Phone #