

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000062578

FILED  
Apr 23, 2009  
Secretary of State

Entity Name: GATORLAND MOBILE TRUCK REPAIR INC

## Current Principal Place of Business:

2875 39TH AVE NE  
NAPLES, FL 34120 US

## New Principal Place of Business:

3055 RAVENNA AVE  
NAPLES, FL 34120 US

## Current Mailing Address:

2875 39TH AVE NE  
NAPLES, FL 34120 US

## New Mailing Address:

3055 RAVENNA AVE  
NAPLES, FL 34120 US

FEI Number: 26-2888544

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LONE, WILLIAM E  
2875 39TH AVE NE  
NAPLES, FL 34120 US

## Name and Address of New Registered Agent:

LONE, WILLIAM E  
3055 RAVENNA AVE  
NAPLES, FL 34120 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:

04/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LONE, WILLIAM E  
Address: 2875 39TH AVE NE  
City-St-Zip: NAPLES, FL 34120 US

Title: VP ( ) Delete  
Name: LONE, JONATHAN G  
Address: 166 GREEN BAY RD APT 207  
City-St-Zip: THIENSVILLE, WI 53092 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: LONE, WILLIAM E  
Address: 3055 RAVENNA AVE  
City-St-Zip: NAPLES, FL 34120 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: WILLIAM E. LONE

P

04/23/2009

Electronic Signature of Signing Officer or Director

Date