

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000102955

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** GATOR PRESSURE CLEANING & CUSTOM PAINTING, INC.

**Current Principal Place of Business:**

443 EAST CENTRAL AVENUE  
WINTER HAVEN, FL 33880

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 7468  
WINTER HAVEN, FL 33883

**New Mailing Address:**

**FEI Number:** 27-1544697

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

GILES, JOSEPH E  
443 EAST CENTRAL AVENUE  
WINTER HAVEN, FL 33880 US

**Name and Address of New Registered Agent:**

GILES, JOSEPH R  
443 EAST CENTRAL AVENUE  
WINTER HAVEN, FL 33880 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:** JOSEPH R GILES

04/29/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** GILES, LYNDIA M  
**Address:** 443 EAST CENTRAL AVENUE  
**City-St-Zip:** WINTER HAVEN, FL 33880

**Title:** PSTD  
**Name:** GILES, JOSEPH R  
**Address:** 443 EAST CENTRAL AVENUE  
**City-St-Zip:** WINTER HAVEN, FL 33880

I hereby 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 all other like empowered.

**SIGNATURE:** LYNDIA M GILES

PD

04/29/2011

Electronic Signature of Signing Officer or Director

Date