

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 30, 2007 08:00 AM
Secretary of State

DOCUMENT # P94000018197

1. Entity Name

GARDNER ENTERPRISES OF AMERICA, INC.



Principal Place of Business

1261 VILLAGE LAKE DRIVE NORTH
DELAND, FL 32724

Mailing Address

1261 VILLAGE LAKE DRIVE NORTH
DELAND, FL 32724

05112007 No Chg-P CR2E034 (11/05)

4. FEI Number

59-3284143

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

TALCOTT, DOROTHEA J
1261 VILLAGE LAKE DRIVE NORTH
DELAND, FL 32724DO 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 the fee applicable

(NOTE: Registered Agent signature required when renewing)

U000000773079

08/30/07-200004-002 150.00

FILE NOW!!! FEE IS \$150.00
Due by September 14, 20079. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to FeesIn accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	TALCOTT, JOHN G III
STREET ADDRESS	1261 VILLAGE LAKE DRIVE NORTH
CITY-STATE-ZIP	DELAND, FL 32724

TITLE	VO
NAME	TALCOTT, DOROTHEA J
STREET ADDRESS	1261 VILLAGE LAKE DRIVE NORTH
CITY-STATE-ZIP	DELAND, FL 32724

TITLE	STD
NAME	TALCOTT, DOROTHEA J
STREET ADDRESS	1261 VILLAGE LAKE DRIVE NORTH
CITY-STATE-ZIP	DELAND, FL 32724

TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

DO NOT WRITE
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:

Dorothea J. Talcott

DOROTHEA J. TALCOTT

Aug. 30 2007

386-738-1789

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Delivery Phone #