2008 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 15, 2008 08:00 All Secretary of State **DOCUMENT # P94000025749** GARLAND INDUSTRIES, INC. Principal Place of Business Mailing Address 9309 9TH AVE. NW 9309 9TH AVE NW BRADENTON, FL 34209 BRADENTON, FL 34209 02182008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0479979 Not Applicable 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE GARLAND, C. RICHARD 9309 9TH AVE. NW BRADENTON, FL 34209 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) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE GARLAND, C. RICHARD NAME 9309 9TH AVE. NW STREET ADDRESS BRADENTON, FL 34209 CITY-ST-ZIP TITLE NAME GARLAND, GERTRUDE M. 9309 9TH AVE. NW STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34209 THILE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS

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:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gertrude M. Garland 4/10/08

941-795-0903

Daytime Prione #

FILED