2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P94000069773 1. Entity Name GE PROPERTY SERVICES, INC.						SECRETARY OF STATE DIVISION OF CORPORATIONS 06 APR 14 PM 3: 12				
Principal Place		Mailing Address	-					•	. 111 0	. 12
3645 BONITA BCH RD P O BOX 369 Ste 3 Bonita Springs, Fl. 3				US						
	NGS, FL 34134 US	BONIN SERINGS, LE ST	1100	00		S IN ERITE I II			IENI (ILIN IITEE II	1881 H 5881
	lace of Business	3. Mailing Address	. 2 . 0	<u> </u>						
Suite, Apt.	Business Lane	P.O. Box 1 Suite, Apt. #, etc.	1018	8			_			
00,0,7,7						01192006	Chg-P	CR2E	034 (11/05)	
City & State		City & State	رد ر د. ا		4. FEI Numb				plied For at Applicable	
Nap!	Country	Bonita Spring		١ ' ' (<u></u>	\$8.75 Add	
341		34133				Fee Required				
	6. Name and Address of Current F	Registered Agent		Name	_	7. Name and	Address of New	Registered	Agent	
ERDMAN, GREGORY A 3645 BONITA BEACH RD				Street Address (P.O. Box Number is Not Acceptable)						
STE 3 BONITA SPRINGS, FL 34134				1081	4	Busin	255 100			· · · · · ·
				City Zip Co					Zip Cod	1 <u>~</u>
8. The above	named entity submits this statement for	the purpose of changing its re	egistered	d office or re		ed agent, or bo	th, in the State of t		<u> </u>	and accept
	ions of registered agent.		,		•	- 0	_			·
SIGNATURE	///		ويحكو	ory	<u>A</u>	Erlm.	n Pres	3	5-29-C	26
	Signature, typed or printed name of registered agent as	nd title if applicable. (NOTE: F	Registerik	Agent agridure r	equred	when renstating)		DATE		
After Ma	E NOW!!! FEE IS \$150.00 By 1, 2006 Fee will be \$550.0			cing		.00 May Be ed to Fees				
10.	OFFICERS AND D		11. Title			ADDITIONS,	CHANGES TO O	FICERS AN		
TITLE NAME	ERDMAN, GREGORY A	<u></u>							Change	Addition
STREET ADDRESS	3645 BONITA BEACH RD STE 3						siness l		-	
CITY-ST-ZIP	BONITA SPRINGS, FL 34134		CITY-S	ST-ZIP	\overline{D}	opies,	FL 341	10		
TITLE NAME		☐ Delete	TITLE						Change	Addition
STREET ADDRESS				T ADDRESS						
CITY-ST-ZIP	<u> </u>		CITY-S	ST-ZIP						
TITLE NAME		☐ Delete	TITLE NAME						☐ Change	Addition
STREET ADDRESS				T ADDRESS		40	00073 /060104	724	084	
CITY-ST-ZIP			CITY-S	ST-ZIP		05/02	<u>/060104</u>	<u>6028</u>	**158.	. 75
TITLE		☐ Delete	TITLE						Change	Addition
NAME Street Address			NAME STREET	T ADDRESS						
CITY-ST-ZIP			CITY-S	51-21P						
TITLE		☐ Delete	TITLE			 			☐ Change	Addition
NAME STREET ADORESS			name Stree	T ADORESS						
CITY-ST-ZIP				ST-ZiP						
TITLE		Delete	TITLE			· · ·	<u></u>		Change	Addition
NAME STREET ADDRESS			NAME	T ADORESS						
CITY-ST-ZP	[.			ST-ZIP						
indicated of the cor	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empo or on an attachment with an address, we	true and accurate and that my wered to execute this report a	y signatu	ıre shall hav	e the s	same legal effe	ct as if made unde	er oath; that	I am an officer	or director
SIGNAT	URE: SIGNATURE OND TYPED OR P	RANTED ROBER OF SIGNAMA OFFICER OF	OFFE COME OF	ony A	E	rlmm	Ples J.	29-06 (239) 59 Dayome Phone #	2-7499
		<u> </u>	<u> </u>			 :-			4/1	70er)