## 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P96000035477

Name:

Address:

City-St-Zip:

**FILED** Sep 05, 2006 Secretary of State

Entity Name: GARRETT INVESTMENT PROPERTIES, INC. **Current Principal Place of Business: New Principal Place of Business:** 1348 HOLLY GLEN RUN APOPKA, FL 32703 **Current Mailing Address: New Mailing Address:** 1348 HOLLY GLEN RUN APOPKA, FL 32703 FEI Number: 59-3378667 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GARRETT, LAWRENCE H 1348 HOLLY GLEN RUN APOPKA, FL 32703 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition GARRETT, LAWRENCE H Name: Name: 1348 HOLLY GLEN RUN Address: Address: City-St-Zip: APOPKA, FL 32703 City-St-Zip: Title: SD Title: () Delete (X) Change ( ) Addition Name: GARRETT, PATRICIA O Name: GARRETT, LAWRENCE H 1348 HOLLY GLEN RUN 1348 HOLLY GLEN RUN Address: Address: APOPKA, FL 32703 City-St-Zip: APOPKA, FL 32703 City-St-Zip: Title: Title: ( ) Delete () Change () Addition GARRETT, NANCY L Name: Name: 1348 HOLLY GLEN RUN Address: Address: City-St-Zip: APOPKA, FL 32703 City-St-Zip: Title: () Delete Title: ( ) Change (X) Addition

I hereby certify that the information supplied with this filing does not qualify for the 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.

Name:

Address:

City-St-Zip:

GARRETT, PATRICIA O

1348 HOLLY GLEN RUN

APOPKA, FL 32703

SIGNATURE: LAWRENCE H GARRETT PD 09/05/2006