

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 14, 2005 8:00 am**  
**Secretary of State**

02-14-2005 90057 012 \*\*\*150.00

DOCUMENT # P96000055164

1. Entity Name:

HGD CONSULTING, INC.



Principal Place of Business

1774 SOUTH DR  
SARASOTA FL 34239

Mailing Address

1774 SOUTH DR  
SARASOTA FL 34239

2. Principal Place of Business

1306 E WASHINGTON ST.  
Suite, Apt. #, etc.

3. Mailing Address

1306 E. WASHINGTON ST.  
Suite, Apt. #, etc.



1st MOORE

CR2E034 (10/04)

City & State

ORLANDO, FL

City & State

ORLANDO FL

4. FEI Number

65-0680221

Applied For

Not Applicable

Zip  
32801

Country

USA

Zip  
32801

Country

USA

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

GEBHARD, LINDA  
1774 SOUTH DR  
SARASOTA FL 34239

7. Name and Address of New Registered Agent

Name GEBHARD, LINDA

Street Address (P.O. Box Number is Not Acceptable)  
1306 E WASHINGTON ST.

City ORLANDO

FL

Zip Code 32801

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

*Linda Gebhard*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2/1/05

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2005 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PDST ☐ Delete  
NAME GEDHARD, LINDA  
STREET ADDRESS 1774 S DRIVE  
CITY-ST-ZIP SARASOTA FL 34239

TITLE VP ☐ Delete  
NAME O'DONNELL, JOHANNAH  
STREET ADDRESS 1774 S DRIVE  
CITY-ST-ZIP SARASOTA FL 34239

TITLE VP ☐ Delete  
NAME O'DONNELL, RYAN  
STREET ADDRESS 1774 S DRIVE  
CITY-ST-ZIP SARASOTA FL 34239

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 1306 E. WASHINGTON ST.  
CITY-ST-ZIP ORLANDO FL 32801

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 2020 LINDA ST.  
CITY-ST-ZIP ORLANDO FL 32803

TITLE ☒ Change ☐ Addition  
NAME C/O GEBHARD  
STREET ADDRESS 1306 E. WASHINGTON ST.  
CITY-ST-ZIP ORLANDO FL 32801

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Linda Gebhard*

2/1/05 (407) 995-6195

Date

Daytime Phone #