

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # P97000061801

1. Entity Name  
G & E INVESTMENTS OF PENSACOLA, INC.



Principal Place of Business  
4300 BAYOU BLVD  
SUITE 12 & 13  
PENSACOLA, FL 32503-1009

Mailing Address  
4300 BAYOU BLVD  
STE 13  
PENSACOLA, FL 32503-1009

**FILED**  
**Mar 03, 2005 08:00 AM**  
**Secretary of State**



02082005 No Chg-P CR2E034 (10/03)

4. FEI Number  
59-3463561

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**

FLEMING, EDWARD P  
4300 BAYOU BLVD  
SUITE 12 & 13  
PENSACOLA, FL 32503-1009

**DO 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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ATCHISON, LOUISE 900 INDUSTRIAL CT PENSACOLA, FL 32505
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FLEMING, EDWARD P 4300 BAYOU BLVD, STE 13 PENSACOLA, FL 32503
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

1100000249737  
03/03/05-80016-003 150.00

**DO NOT WRITE  
IN THIS SPACE**

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]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

2/9/05

(850) 477-0660

Date

Daytime Phone #