


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

Jul 11, 2005 08:00 AM
Secretary of State

DOCUMENT # P97000071392 1. Entity Name GREAT WAVES, INC.	
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Principal Place of Business
**3435 ROSEBAY CT
SPRING HILL, FL 34609**

Mailing Address
**3435 ROSEBAY CT
SPRING HILL, FL 34609**



07042005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3463840	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**CARIO, JEFFREY P
7381 FOREST OAKS BLVD.
SPRING HILL, FL 34606**

**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
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST- ZIP	P GARRETT, JODY A 3435 ROSEBAY CT SPRING HILL, FL 34609
TITLE NAME STREET ADDRESS CITY-ST- ZIP	STD GARRETT, RICHARD 3435 ROSEBAY CT SPRING HILL, FL 34609
TITLE NAME STREET ADDRESS CITY-ST- ZIP	
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TITLE NAME STREET ADDRESS CITY-ST- ZIP	
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07/11/05-80011-014 150.00

**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: Richard Garrett

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICHARD GARRETT

7/1/05

Date

352)683-6622

Daytime Phone #