

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 16, 2004 08:00 AM
Secretary of State

DOCUMENT # P97000106878

1. Entity Name

GARRISON ENGINEERING SERVICES, INC.



Principal Place of Business

4826 SOUTH U.S. #1
FT. PIERCE, FL 34982

Mailing Address

4826 SOUTH U.S. #1
FT. PIERCE, FL 34982



07062004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0800983

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GARRISON, VICTOR E
1201 KINGSWOOD LN
FT. PIERCE, FL 34982

**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 Victor E. Garrison
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when relocating)

7/6/04
DATE

FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004

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 DPC
NAME GARRISON, VICTOR E
STREET ADDRESS 6106 SUNSET BLVD
CITY-ST-ZIP FT. PIERCE, FL 34982

TITLE OS
NAME GARRISON, VIKKI
STREET ADDRESS 6106 SUNSET BLVD
CITY-ST-ZIP FT. PIERCE, FL 34982

TITLE DV
NAME WILDSCHUETZ, HARVEY F
STREET ADDRESS 1739 KELSO AVENUE
CITY-ST-ZIP LAKE WORTH, FL 33460

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1100000166525
07/16/04-80002-025 150.00

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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)(c), 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:

Victor E Garrison Pres 7/6/04 772-466-2500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #