

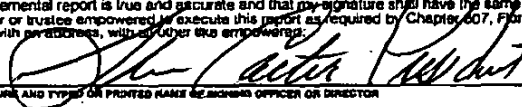
Mar 17 05 03:03p

Brevard Accounting Group

FILED
Apr 19, 2005 8:00 am
Secretary of State

03-21-2005 90075 017 ***150.00

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P99000050344		
1. Entity Name G & C SALES AND SERVICES OF MELBOURNE, INC.		
Principal Place of Business 150 SHANNON AVENUE WEST MELBOURNE, FL 32904		Mailing Address 150 SHANNON AVENUE WEST MELBOURNE, FL 32904
DO NOT WRITE IN THIS SPACE		
		03172005 No Chg-P CR2E034 (10/03)
		4. FEI Number 59-3580370
		Applied For Not Applicable
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent CARTER, GLENN C 150 SHANNON AVENUE WEST MELBOURNE, FL 32904		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 reappointing)		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 CARTER, GLENN C 2530 SIMON ROAD MELBOURNE, FL 32904	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CARTER, BETTY L 150 SHANNON AVENUE WEST MELBOURNE, FL 32904	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE 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 or without the empowerment.		
SIGNATURE: 		Date 4/12/05 321-84-2445