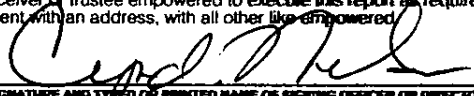


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2008 08:00 AM
Secretary of State

DOCUMENT # P99000102776		
1. Entity Name GAZEBO DEPOT, INC.		
Principal Place of Business 3790 N. MONTANA AVE. HELENA, MT 59602		Mailing Address 3790 N. MONTANA AVE. HELENA, MT 59602
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent ROSS, HARRY J ESQ. 6100 GLADES ROAD SUITE 211 BOCA RATON, FL 33434		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 amending)		
FILE NUMBER FEE IS \$150.00 After May 1, 2008 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	VSTD NELSON, CYNDI 3780 N. MONTANA AVE. HELENA, MT 59602	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P NELSON, JEFFREY S 3780 N. MONTANA AVE. HELENA, MT 59602	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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		



04242008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0965049	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

U00000927150
05/20/08-80093-024 150.00

**DO NOT WRITE
IN THIS SPACE**

4/24/08 406-441-1552