


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2005 08:00 AM
Secretary of State

DOCUMENT # S06092 1. Entity Name GERRELL PLANTATION, INC.		
Principal Place of Business 10608 GERRELL DRIVE TALLAHASSEE, FL 32311	Mailing Address 10608 GERRELL DRIVE TALLAHASSEE, FL 32311	
<h2 style="margin: 0;">DO NOT WRITE IN THIS SPACE</h2>		
<div style="display: flex; justify-content: space-between;"> 03302005 No Chg-P CR2E034 (10/03) </div>		
4. FEI Number 59-3033113		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent GERRELL, J. LAWSON 10608 GERRELL DRIVE TALLAHASSEE, FL 32311		
<h2 style="margin: 0;">DO NOT WRITE IN THIS SPACE</h2>		
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 <u>J. Lawson Gerrell</u> <u>J. LAWSON GERRELL</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when rehashing)</small>		DATE <u>4-8-05</u>
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
		U00000302965 04/13/05-80092-016 150.00
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BUTLER, MARILEE GERRELL 10608 GERRELL DRIVE TALLAHASSEE, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV GERRELL, J. LAWSON 10608 GERRELL DRIVE TALLAHASSEE, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS GERRELL, ALLEN R. 10608 GERRELL DRIVE TALLAHASSEE, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT GERRELL, W. DALE 10608 GERRELL DRIVE TALLAHASSEE, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<h2 style="margin: 0;">DO NOT WRITE IN THIS SPACE</h2>	
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 all other like empowered.		
SIGNATURE: <u>W. Dale Gerrell - W. Dale Gerrell - Treasurer</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <u>4/7/05</u> <u>850-421-8108</u> <small>Daytime Phone #</small>