

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 10, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # S79823**

1. Entity Name  
G.L. SPIES COMPANY, INC.



Principal Place of Business  
5311 W. CRENSHAW ST.  
TAMPA, FL 33634-2406 US

Mailing Address  
5311 W. CRENSHAW STREET  
TAMPA, FL 33634-2406 US



02062006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-3083949

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

SPIES, RICHARD  
12906 BRUSHY PINE PLACE  
TAMPA, FL 33624

**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  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

U000000428818  
02/21/06-80061-021 150.00

**10. OFFICERS AND DIRECTORS**

TITLE	PD
NAME	SPIES, RICHARD
STREET ADDRESS	12906 BRUSHY PINE PLACE
CITY-ST-ZIP	TAMPA, FL
TITLE	STD
NAME	SPIES, KATHLEEN C.
STREET ADDRESS	4681 1ST ST. NE., APT. 403
CITY-ST-ZIP	ST. PETERSBURG, FL
TITLE	D
NAME	SPIES, GERALD L.
STREET ADDRESS	4681 1ST ST. N.E., APT. 403
CITY-ST-ZIP	ST. PETERSBURG, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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.

**KATHLEEN C. SPIES, TREASURER**

**SIGNATURE:** *Kathleen C. Spies, Treasurer*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Feb.07, 2006**

Date

**(813) 249-9511**

Daytime Phone #