

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**DOCUMENT # V25835**

1. Entity Name  
GARDNYR MICHAEL CAPITAL, INC.



Principal Place of Business  
2281 LEE ROAD  
SUITE 104  
WINTER PARK, FL 32789

Mailing Address  
500 BLVD PARK E  
MOBILE, AL 36609

**FILED**  
**Jan 13, 2006 08:00 AM**  
**Secretary of State**



01062006 No Chg-P CR2E034 (11/05)

4. FEI Number  
59-3127750

Applied For  
Not Applied

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

**DO NOT WRITE IN THIS SPACE**

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

HUNT, PHILIP G. JR  
2251 LEE ROAD  
SUITE 104  
WINTER PARK, FL 32789

**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, 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 PD  
NAME HUNT, PHILIP G. JR  
STREET ADDRESS 500 BLVD PARK E  
CITY-ST-ZIP MOBILE, AL 36609

TITLE VST  
NAME PIETKIEWICZ, JAMES M.  
STREET ADDRESS 2281 LEE ROAD, SUITE 104  
CITY-ST-ZIP WINTER PARK, FL 32789

TITLE D  
NAME PIETKIEWICZ, JAMES M.  
STREET ADDRESS 2281 LEE ROAD, SUITE 104  
CITY-ST-ZIP WINTER PARK, FL 32789

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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NAME  
STREET ADDRESS  
CITY-ST-ZIP

000000385208  
01/18/06-80007-007 150.00

**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 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

1/6/06

Date

351-342-6384

Daytime Phone #