

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P19000000803

**Entity Name:** GATOR CORP

**Current Principal Place of Business:**

425 PALM TRAIL  
DELRAY BEACH, FL 33483

**Current Mailing Address:**

425 PALM TRAIL  
DELRAY BEACH, FL 33483 US

**FEI Number:** 83-3106874

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SWANK, STEPHEN  
309 NE 1 STREET  
DELRAY BEACH, FL 33483 US

*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.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name SWANK, STEPHEN  
Address 425 PALM TRAIL  
City-State-Zip: DELRAY BEACH FL 33483

Title TRE  
Name SWANK, STEPHEN  
Address 425 PALM TRAIL  
City-State-Zip: DELRAY BEACH FL 33483

Title SEC  
Name SWANK, STEPHEN  
Address 425 PALM TRAIL  
City-State-Zip: DELRAY BEACH FL 33483

Title VP  
Name SWANK, STEPHEN  
Address 425 PALM TRAIL  
City-State-Zip: DELRAY BEACH FL 33483

Title DIR  
Name SWANK, STEPHEN  
Address 425 PALM TRAIL  
City-State-Zip: DELRAY BEACH FL 33483

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** STEPHEN SWANK

P

04/22/2019

Electronic Signature of Signing Officer/Director Detail

Date