

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000043561

1. Entity Name
MICHAEL CRANFORD'S GUTTER SOLUTIONS, INC.



Principal Place of Business
30428 WEST THYME AV
EUSTIS, FL 32736

Mailing Address
30428 WEST THYME AV
EUSTIS, FL 32736

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

07032007

Chg-P

CR2E034 (12/06)

4. FEI Number

20-4567345

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CRANFORD, JEANNETTE C
30428 WEST THYME AV
EUSTIS, FL 32736

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Jeannette Cranford, Secretary

9/1/07

FILE NOW!!! FEE IS \$650.00
Due by September 14, 2007

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P
CRANFORD, MICHAEL D
30428 WEST THYME AV
EUSTIS, FL 32736

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
800110222338
10/03/07--01032--003 **\$50.00

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
S
CRANFORD, JEANNETTE C
30428 WEST THYME AV
EUSTIS, FL 32736

TITLE
NAME
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CITY - ST - ZIP

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STREET ADDRESS
CITY - ST - ZIP

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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:

Jeannette Cranford, Secretary

9/1/07

352-636-0808

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #