2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2008
Secretary of State

DOCUMENT# P06000049577

Entity Name: G/C STORM PROTECTION INC

Current Principal Place of Business:

428 CHILDERS STEET
PENSACOLA, FL 32539

New Principal Place of Business:

428 CHILDERS STEET
499
PENSACOLA, FL 32539

Current Mailing Address:

PMB, 499, PO BOX 2430
PENSACOLA, FL 32513

New Mailing Address:

FEI Number: 20-4644248 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, CAROLYN F
428 CHILDERS ST
PENSACOLA, FL 32534 US

Name and Address of New Registered Agent:

SMITH, CAROLYN F
428 CHILDERS ST
499
PENSACOLA, FL 32534 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: CAROLYN SMITH 01/22/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SMITH, GEORGE
Address: 428 CHILDERS ST
City-St-Zip: PENSACOLA, FL 32534

Title: VP ( ) Delete
Name: SMITH, CAROLYN
Address: 428 CHILDERS STREET
City-St-Zip: PENSACOLA, FL 32534

Title: ST ( ) Delete
Name: SMITH, CAROLYN
Address: 428 CHILDERS STEET
City-St-Zip: PENSACOLA, FL 32534

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SMITH, CAROLYN
Address: 428 CHILDERS ST
City-St-Zip: PENSACOLA, FL 32534

Title: VP (X) Change ( ) Addition
Name: SMITH, GEORGE
Address: 428 CHILDERS STREET
City-St-Zip: PENSACOLA, FL 32534

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: CAROLYN SMITH P 01/22/2008
Electronic Signature of Signing Officer or Director Date