

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000009484

Entity Name: ABSOLUTE GUTTERS, INC.

FILED
Apr 05, 2009
Secretary of State

Current Principal Place of Business:

2415 DESTINY WAY
UNIT 2
ODESSA, FL 33556 US

Current Mailing Address:

P.O. BOX 271622
TAMPA, FL 33688 US

New Principal Place of Business:

2410 SUCCESS DRIVE
UNIT 12
ODESSA, FL 33556 US

New Mailing Address:

FEI Number: 59-3225165 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DRUDY & ASSOCIATES, INC.
320 W. FLETCHER
STE. 101
TAMPA, FL 33612 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DALLMANN, MICHEAL J
Address: 5823 RIVA RIDGE DR
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: VP () Delete
Name: MARSICANO, JUSTIN E
Address: 9011 OYSTER SHELL TR
City-St-Zip: ODESSA, FL 33556

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: MICHAEL DALLMANN

P

04/05/2009

Electronic Signature of Signing Officer or Director

Date