

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 366582

FILED
Apr 10, 2009
Secretary of State

Entity Name: G. F. WEISS INDUSTRIES, INC.

Current Principal Place of Business:

7860 126TH AVENUE NORTH
LARGO, FL 33773

New Principal Place of Business:

Current Mailing Address:

7860 126TH AVENUE NORTH
LARGO, FL 33773 US

New Mailing Address:

7860 126TH AVENUE NORTH
LARGO, FL 33773

FEI Number: 59-1311072

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBBINS, RICHARD M.
1230 S. MYRTLE AVE., STE 301
CLEARWATER, FL 34616 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: WEISS, LUCILLE
Address: 337 MIDWAY ISLAND
City-St-Zip: CLEARWATER, FL 33767

Title: V () Delete
Name: WEISS, JEFFREY G
Address: 1465 49TH AVENUE
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: ST () Delete
Name: LOHKAMP, NORMA
Address: 429-20TH AVENUE
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: D () Delete
Name: WEISS, GEORGE
Address: 337 MIDWAY ISLAND
City-St-Zip: CLEARWATER, FL 33767

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: NORMA LOHKAMP

ST

04/10/2009

Electronic Signature of Signing Officer or Director

Date