

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 617550

FILED
Feb 19, 2008
Secretary of State

Entity Name: GATOR DOOR AND SUPPLY COMPANY, INC.

Current Principal Place of Business:

3009 NE 19TH DR
GAINESVILLE, FL 32609

New Principal Place of Business:

Current Mailing Address:

3009 NE 19TH DR
GAINESVILLE, FL 32609

New Mailing Address:

FEI Number: 59-1904179

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POGUE, CYRIL E
6820 W. LINEBAUGH AVE.
SUITE D
TAMPA, FL 33625 US

Name and Address of New Registered Agent:

POGUE, CYRIL E III
6820 W. LINEBAUGH AVE.
SUITE D
TAMPA, FL 33625 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: CYRIL E. POGUE, III

02/19/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: POGUE, CYRIL E
Address: 3009 NE 19TH DR
City-St-Zip: GAINESVILLE, FL 32609

Title: D () Delete
Name: PAGANO, BRUCE
Address: 3009 NE 19TH DR
City-St-Zip: GAINESVILLE, FL 32609

Title: D () Delete
Name: FARMER, ED
Address: 3009 NE 19TH DR
City-St-Zip: GAINESVILLE, FL 32609

Title: D () Delete
Name: DOGANIERO, PHILIP
Address: 3009 NE 19TH DR
City-St-Zip: GAINESVILLE, FL 32609

Title: D () Delete
Name: HAYDON, ROGERS
Address: 3009 NE 19TH DR
City-St-Zip: GAINESVILLE, FL 32609

Title: ST () Delete
Name: MIN, PATRICK
Address: 3009 NE 19TH DR
City-St-Zip: GAINESVILLE, FL 32609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: POGUE, CYRIL E III
Address: 3009 NE 19TH DR
City-St-Zip: GAINESVILLE, FL 32609

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:

Title: D (X) Change () Addition
Name: KREILEIN, DAVID
Address: 3009 NE 19TH DR
City-St-Zip: GAINESVILLE, FL 32609

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: CYRIL E. POGUE, III

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02/19/2008

Electronic Signature of Signing Officer or Director

Date