

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 654993

Entity Name: MIKE'S GUTTERING, INC.

FILED
Apr 19, 2009
Secretary of State

Current Principal Place of Business:

2861 WORK DR.
3
FORT MYERS, FL 33916 US

New Principal Place of Business:

Current Mailing Address:

2861 WORK DR.
3
FORT MYERS, FL 33916 US

New Mailing Address:

FEI Number: 59-1965759 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHARPLESS, CAROL C PRES
1225 BUENA VISTA DR.
NORTH FORT MYERS, FL 33903 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: PDT () Delete
Name: SHARPLESS, CAROL C PDT
Address: 1225 BUENA VISTA DR.
City-St-Zip: NORTH FORT MYERS, FL 33903 US

Title: V () Delete
Name: SHARPLESS, WILLIAM E V
Address: 1225 BUENA VISTA DR.
City-St-Zip: NORTH FORT MYERS, FL 33903 US

Title: D () Delete
Name: DAVIS, GEORGE A D
Address: 14026 MARQUETTE BLVD.
City-St-Zip: FT. MYERS, FL 33905 US

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:

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: CAROL C SHARPLESS

PDT

04/19/2009

Electronic Signature of Signing Officer or Director

_____ Date