

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000000823

FILED  
Jan 07, 2008  
Secretary of State

Entity Name: GULDMANN, INC.

## Current Principal Place of Business:

5525 JOHNS RD. SUITE 905  
TAMPA, FL 33634 US

## New Principal Place of Business:

## Current Mailing Address:

5525 JOHNS RD. SUITE 905  
TAMPA, FL 33634 US

## New Mailing Address:

FEI Number: 58-2360050

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KOCH, STEPHEN A  
711 S. DALE MABRY AVENUE  
SUITE 300  
TAMPA, FL 33609 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: PCD ( ) Delete  
Name: BUSSE JENSEN, ANDERS D  
Address: 5525 JOHNS ROAD, STE 905  
City-St-Zip: TAMPA, FL 33634 US

Title: SD ( ) Delete  
Name: KOCH, STEPHEN A  
Address: 500 E. KENNEDY BLVD. STE. 100  
City-St-Zip: TAMPA, FL 33602 US

Title: VP ( ) Delete  
Name: BOWMAN, LINDA L  
Address: 5505 JOHNS ROAD, STE. 700  
City-St-Zip: TAMPA, FL 33634 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change ( ) Addition  
Name: KOCH, STEPHEN A  
Address: 711 S. DALE MABRY AVENUE, SUITE 300  
City-St-Zip: TAMPA, FL 33609 US

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: LINDA BOWMAN

VP

01/07/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date