2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000005858

Entity Name: GIBRALTAR DESIGN, INC., ARCHITECTS & ENGINEERS

FILED Jul 08, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
	RIDIAN ST #3 DLIS, IN 4626						
Current Mailing Address:				New Mailing Address:			
	RIDIAN ST #3 DLIS, IN 4626						
FEI Number: 3	35-1988387	FEI Number Applied For ()	FEI Numb	oer Not Appli	cable ()	Certificate of Status Desired (X	()
Name and	Address of C	Current Registered Agent:	N	Name and	Address of N	ew Registered Agent:	
FENCL, JOHN P TOWN CENTER 1 OFFICE BUILDING 475 WEST TOWN PLACE SUITE 100 SAINT AUGUSTINE, FL 32092 US The above named entity submits this statement for the purpose of				FENCL, JOHN P 9102 N MERIDIAN STREET #300 INDIANAPOLIS, IN, FL 46260 US of changing its registered office or registered agent, or both,			
in the State							
SIGNATUR	E: JOHN P.		.1			07/08/2005	
Election Cam		nic Signature of Registered Ager g Trust Fund Contribution().	IL			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	T () FENEL, JOHN F 9102 N MERIDI INDIANAPOLIS	IAN ST #300	۸ م	Fitle: Name: Address: Dity-St-Zip:	T (X) FENCL, JOHN P 9102 N MERIDIA INDIANAPOLIS,	AN ST #300	
Title: Name: Address: City-St-Zip:	HENNESSEY, J	ROSSING PKWY #350	۸ م	Fitle: Name: Address: Dity-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	DC (X) EVANS, H. DEA 9102 N. MERID INDIANAPOLIS	IAN ST #300	۸ م	Fitle: Name: Address: Dity-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	DP () THOMPSON, JA 9102 N MERIDI INDIANAPOLIS	IAN ST #300	۸ م	Fitle: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	BRAMMER, JA	ROSSING PKWY #350	۸ م	Title: Name: Address: Dity-St-Zip:	()	Change () Addition	
Title:							

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOHN P. FENCL T 07/08/2005