## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F96000005858

Jul 27, 2007 Secretary of State

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

**Current Principal Place of Business: New Principal Place of Business:** 9102 N MERIDIAN ST #300 INDIANAPOLIS, IN 46260 **Current Mailing Address: New Mailing Address:** 9102 N MERIDIAN ST #300 INDIANAPOLIS, IN 46260 FEI Number: 35-1988387 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PETERSON & MYERS 225 EAST LEMON STREET SUITE 300 LAKELAND, FL 33801 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: Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition FENCL, JOHN P Name: Name: 9102 N MERIDIAN ST #300 Address: Address: City-St-Zip: INDIANAPOLIS, IN 46260 City-St-Zip: Title: Title: () Delete () Change () Addition Name: HENNESSEY, JOHN Name: 3815 RIVER CROSSING PKWY #350 Address: Address: INDIANAPOLIS, IN 46260 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: DP () Change () Addition THOMPSON, JAMES Name: Name: 9102 N MERIDIAN ST #300 Address: Address: City-St-Zip: INDIANAPOLIS, IN 46260 City-St-Zip: Title: () Delete Title: () Change () Addition BRAMMER, JAY A Name: Name: 3815 RIVER CROSSING PKWY #350 Address: Address: City-St-Zip: INDIANAPOLIS, IN 46240 City-St-Zip: Title: Title: () Delete () Change () Addition TODD, HARRY Name: Name: 3815 RIVER CROSSING PKWY #350 Address: Address: City-St-Zip: INDIANAPOLIS, IN 46240 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: JOHN P. FENCL T 07/27/2007