

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G47610

FILED  
Jan 08, 2008  
Secretary of State

Entity Name: BAR-FAB OF FLORIDA, INC.

**Current Principal Place of Business:**

12255 44TH STREET NORTH  
CLEARWATER, FL 33762

**New Principal Place of Business:**

**Current Mailing Address:**

12255 44TH STREET NORTH  
CLEARWATER, FL 33762

**New Mailing Address:**

FEI Number: 59-2470151

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

GROWE, DEAN E  
12255 - 44TH ST., N.  
CLEARWATER, FL 33762 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: C-D ( ) Delete  
Name: FISHER, VICKI LACINA,  
Address: 12255 44TH STREET NORTH  
City-St-Zip: CLEARWATER, FL 33762

Title: M ( ) Delete  
Name: GROWE, DAVID C.,  
Address: 12255 44TH STREET NORTH  
City-St-Zip: CLEARWATER, FL 33762

Title: P-S ( ) Delete  
Name: GROWE, ROBERT C  
Address: 12255 44TH STREET NORTH  
City-St-Zip: CLEARWATER, FL 33762

Title: V-T ( ) Delete  
Name: GOSSETT, KARON I  
Address: 12255 44TH STREET NORTH  
City-St-Zip: CLEARWATER, FL 33762

**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:

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: DEAN E. GROWE

RA

01/08/2008

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date