

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 16, 2008 08:00 A
Secretary of State

DOCUMENT # J84604

1. Entity Name
SOUTHBAY FRAMING SYSTEMS, INC.



Principal Place of Business

% ROBERT D. GEERS
124 BURNEY ROAD
OSPREY, FL 34229

Mailing Address

% ROBERT D. GEERS
124 BURNEY ROAD
OSPREY, FL 34229



04132008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2820498

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

GEERS, ROBERT D.
124 BURNEY ROAD
OSPREY, FL 34229

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U000000901789
04/29/08-80082-006 158.75

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	GEERS, ROBERT D.
STREET ADDRESS	124 BURNEY ROAD
CITY-ST-ZIP	OSPREY, FL
TITLE	S
NAME	GEERS, LOUISE
STREET ADDRESS	124 BURNEY RD
CITY-ST-ZIP	OSPREY, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert D Geers
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-13-08

Date

941-966-4420

Daytime Phone #