

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K70750

Entity Name: SPECIALTY SYSTEMS, INC.

FILED  
Jan 08, 2008  
Secretary of State

## Current Principal Place of Business:

5601 GASPAR OAKS DRIVE  
TAMPA, FL 33611 US

## New Principal Place of Business:

216B 150TH AVENUE  
MADEIRA BEACH, FL 33708 US

## Current Mailing Address:

PO BOX 1747  
TAMPA, FL 336011747

## New Mailing Address:

462 BOCA CIEGA POINT BLVD SOUTH  
MADEIRA BEACH, FL 33708

FEI Number: 59-2948041

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BASFORD, MICHAEL  
24 N. MARKET ST.  
SUITE 404  
JACKSONVILLE, FL 32202 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: P ( ) Delete  
Name: MARGARET C. BURNEY,  
Address: P O BOX 1747  
City-St-Zip: TAMPA, FL 33601

Title: VP ( ) Delete  
Name: JOYNER, GLENN R  
Address: 5601 GASPAR OAKS DR  
City-St-Zip: TAMPA, FL 33611

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MARGARET C. BURNEY,  
Address: 216B 150TH AVENUE  
City-St-Zip: MADEIRA BEACH, FL 33708

Title: VP (X) Change ( ) Addition  
Name: JOYNER, GLENN R  
Address: 216B 150TH AVENUE  
City-St-Zip: MADEIRA BEACH, FL 33708

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: GLENN JOYNER

VP

01/08/2008

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

\_\_\_\_\_  
Date