

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K79226

FILED  
Apr 10, 2009  
Secretary of State

Entity Name: CUSTOM KAR TOPS INC.

**Current Principal Place of Business:**

C/O WALTER EVERETT GREER  
1968 CUSTOM DR.  
FT. MYERS, FL 33907

**New Principal Place of Business:**

**Current Mailing Address:**

C/O WALTER EVERETT GREER  
1968 CUSTOM DR.  
FT. MYERS, FL 33907

**New Mailing Address:**

FEI Number: 65-0133992

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GREER, WALTER EVERETT  
1968 CUSTOM DR.  
FT. MYERS, FL 33907 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: D ( ) Delete  
Name: GREER, WALTER EVERETT  
Address: 1408 TOUCHSTONE RD.  
City-St-Zip: NORTH FT. MYERS, FL 33903

Title: D ( ) Delete  
Name: GREER, GLORIA P.  
Address: 1408 TOUCHSTONE RD.  
City-St-Zip: NORTH FT. MYERS, FL 33903

Title: D ( ) Delete  
Name: GIFFLICK, LORRI M  
Address: 17865 CHESTER FIELD RD  
City-St-Zip: NORTH FORT MYERS, FL 33917

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: GARLICK, LORRI M  
Address: 17865 CHESTER FIELD RD  
City-St-Zip: NORTH FORT MYERS, FL 33917

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: WALTER EVERETT GREER

PRES

04/10/2009

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

\_\_\_\_\_  
Date