

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M74603

FILED
Jan 05, 2005
Secretary of State

Entity Name: DESIGNER GUTTER COMPANY

Current Principal Place of Business:

201 TOWER DRIVE
B
OLDSMAR, FL 34677

New Principal Place of Business:

Current Mailing Address:

C/O THOMAS M. NORMAN
PO BOX 30
OLDSMAR, FL 34677

New Mailing Address:

FEI Number: 59-2890864

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NORMAN, THOMAS
368 HEDGEROW LANE
TARPON SPRINGS, FL 34689 US

Name and Address of New Registered Agent:

NORMAN, THOMAS
368 HEDGEROW LANE
TARPON SPRINGS, FL 34688 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: THOMAS M. NORMAN

01/05/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NORMAN, THOMAS M.,
Address: 368 HEDGEROW LANE
City-St-Zip: TARPON SPRINGS, FL

Title: VP () Delete
Name: NORMAN, CARMEN
Address: 368 HEDGEROW LANE
City-St-Zip: TARPON SPRINGS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 for the exemption stated in Section 119.07(3)(i), 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: THOMAS M. NORMAN

P

01/05/2005

Electronic Signature of Signing Officer or Director

Date