

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000105234

Entity Name: HOMEGUARD DISTRIBUTORS, INC.

FILED
Jan 09, 2007
Secretary of State

Current Principal Place of Business:

12597 ULMERTON RD.
LARGO, FL 33774

New Principal Place of Business:

Current Mailing Address:

12597 ULMERTON RD.
LARGO, FL 33774

New Mailing Address:

FEI Number: 59-3689206

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GORDON, GLENN D
12597 ULMERTON RD.
LARGO, FL 33774 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: DP () Delete
Name: GORDON, GLENN D
Address: 12597 ULMERTON RD.
City-St-Zip: LARGO, FL 33774

Title: ST () Delete
Name: GORDON, JULIE M
Address: 4908 SOUTH SH DR
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: VP () Delete
Name: GORDON, CRAIG A
Address: 1710 E IRONWOOD CIR
City-St-Zip: OLDSMAR, FL 34677

Title: VP () Delete
Name: GORDON, GARRY W
Address: 1833 GREENHILL DR
City-St-Zip: CLEARWATER, FL 33755

Title: D () Delete
Name: GORDON, HARLOD
Address: 954 FOUNTAINHEAD
City-St-Zip: LARGO, FL 33770

Title: D () Delete
Name: STOVER, WILLIAM J
Address: 5005 SAN JOSE ST.
City-St-Zip: MIAMI, FL 33269

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: ST (X) Change () Addition
Name: GORDON, JULIE M
Address: 4908 SOUTH SHORE DR
City-St-Zip: NEW PORT RICHEY, FL 34652

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: D (X) Change () Addition
Name: STOVER, WILLIAM J
Address: 549 SUWANEE CIRCLE
City-St-Zip: TAMPA, FL 33606

I hereby certify that the information supplied with this filing does not qualify for the 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: JULIE M GORDON

ST

01/09/2007

Electronic Signature of Signing Officer or Director

Date