

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 24, 2008 08:00 AM
Secretary of State

DOCUMENT # P02000009136

1. Entity Name
EARTHTEK SYSTEMS OF FLORIDA, INC.



Principal Place of Business
**1919-11 BLANDING BLVD
JACKSONVILLE, FL 32210**

Mailing Address
**1919-11 BLANDING BLVD
JACKSONVILLE, FL 32210**



01082008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 03-0379794	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**GIDCUMB, ROBERT
1919-11 BLANDING BLVD.
JACKSONVILLE, FL 32210**

**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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	MCEACTIN, JOE
STREET ADDRESS	1919-11 BLANDING BLVD.
CITY-ST-ZIP	JACKSONVILLE, FL 32210
TITLE	VP
NAME	GIDCUMB, ROBERT
STREET ADDRESS	1919-11 BLANDING BLVD
CITY-ST-ZIP	JACKSONVILLE, FL 32210
TITLE	V
NAME	MCEACHIN, JOE
STREET ADDRESS	1919-11 BLANDING BLVD.
CITY-ST-ZIP	JACKSONVILLE, FL 32210
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/25/08-80034-004 150.00

**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 Gidcumb* **Robert Gidcumb**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-10-08
Date

904-381-0405
Daytime Phone #