

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2007 8:00 am
Secretary of State

03-12-2007 90372 038 ***158.75

DOCUMENT # P03000016160

1. Entity Name
SUPERIOR INSTALLATION PROFESSIONALS INC.



Principal Place of Business

**36727 EMERALDA ISLAND RD.
LEESBURG, FL 34788 US**

Mailing Address

**36727 EMERALDA ISLAND RD.
LEESBURG, FL 34788 US**

2. Principal Place of Business - No P.O. Box #

36628 ORANGE STREET

3. Mailing Address

33848 VALENCIA DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

LEESBURG, FLORIDA

City & State

LEESBURG, FLORIDA

Zip

34788

Country

LAKE

Zip

34788

Country

LAKE

03062007

Chg-P

CR2E034 (12/06)

4. FEI Number

13-4240190

Applied For

Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**GWALTNEY, LINDA L
35727 EMERALDA ISLAND RD.
LEESBURG, FL 34788**

7. Name and Address of New Registered Agent

Name
TIM M GWALTNEY

Street Address (P.O. Box Number is Not Acceptable)

33848 VALENCIA DRIVE

City
LEESBURG

FL

Zip Code
34788

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 *Tim M. Gwaltney*
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

3-7-07

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
GWALTNEY, LINDA L
36727 EMERALDA ISLAND ROAD
LEESBURG, FL 34788** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
GWALTNEY, TIM M
36727 EMERALDA ISLAND RD.
LEESBURG, FL 34788** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TRES
GWALTNEY, LINDA L
36727 EMERALDA ISLAND RD.
LEESBURG, FL 34788** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
GWALTNEY, TIM M
33848 VALENCIA DRIVE, LEESBURG, FL 34788** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TRES
GRAVES, PENNY A
33848 VALENCIA DRIVE, LEESBURG, FL 34788** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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: *Tim M. Gwaltney* **TIM M GWALTNEY**

3-7-07 352-728-2104