

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000093686

1. Entity Name
AMERICAN GUNITE, INC.



Principal Place of Business
8105 MAINLINE PARKWAY
FORT MYERS, FL 33912

Mailing Address
8105 MAINLINE PARKWAY
FORT MYERS, FL 33912

FILED
Sep 10, 2008 08:00 AM
Secretary of State



04172008 No Chg-P CR2E034 (11/05)

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4. FEI Number
65-1203452
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SMOOT, JAMES T III
1533 HENDRY STREET
SUITE 200
FORT MYERS, FL 33901

**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 _____ (NOTE: Registered Agent signature required when renewing) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$180.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

U00000959363
09/10/08-80001-002 550.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	ABBOTT, RICK
STREET ADDRESS	8105 MAINLINE PARKWAY
CITY-ST-ZIP	FORT MYERS, FL 33912
TITLE	V
NAME	ABBOTT, PAULINE
STREET ADDRESS	8105 MAINLINE PARKWAY
CITY-ST-ZIP	FORT MYERS, FL 33912
TITLE	T
NAME	ABBOTT, RICK
STREET ADDRESS	8105 MAINLINE PARKWAY
CITY-ST-ZIP	FORT MYERS, FL 33912
TITLE	S
NAME	ABBOTT, PAULINE
STREET ADDRESS	8105 MAINLINE PARKWAY
CITY-ST-ZIP	FORT MYERS, FL 33912
TITLE	D
NAME	ABBOTT, RICK
STREET ADDRESS	8105 MAINLINE PARKWAY
CITY-ST-ZIP	FORT MYERS, FL 33912
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: *Pauline Abbott* *Pauline Abbott*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-3-08 239-340-
5773
Date Daytime Phone #