

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000132265

1. Entity Name  
GIPSON HOME IMPROVEMENT, INC



**FILED**  
**Jul 23, 2008 08:00 AM**  
**Secretary of State**

Principal Place of Business  
1799 BOOTH LAKE ROAD  
CANTONMENT, FL 32533 US

Mailing Address  
1799 BOOTH LAKE ROAD  
CANTONMENT, FL 32533 US



07182008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-0394479

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

GIPSON, LEONARD  
1799 BOOTH LAKE ROAD  
CANTONMENT, FL 32533

**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  
Due by September 12, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	GIPSON, LEONARD
STREET ADDRESS	1799 BOOTH LAKE ROAD
CITY-ST-ZIP	CANTONMENT, FL 32533
TITLE	S
NAME	GIPSON, SHARON
STREET ADDRESS	1799 BOOTH LAKE ROAD
CITY-ST-ZIP	CANTONMENT, FL 32533
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000956108  
07/23/08-80003-020 150.00

**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:

*Leonard Gipson*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-21-08

Date

850 982 4772

Daytime Phone #