2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 12, 2004 8:00 am Secretary of State

DOCUMENT # P03000154404			Secretary of	
1. Enlity Name RAINBOW GUTTERS OF ELAGLER COUNTY, INC.			01-12-2004 90024 043	3 ***150.00
Principal Place of Business	Mailing Address	· .		
1159 COUNTY ROAD 75 BUNNELL, FL 32110	P.O. BOX 1258 Flagler Beach, FL 32	136	·	- •
SOMVELL, I'E 32110	PLAGEER DEAGN, IE 32	.130	L MCCCONT IN COURT WITH CONTRACT CONTRACTOR	
2. Principal Place of Business	3. Mailing Address	^ \		
1159 County Ro Suite, Apt. #, etc. Suite, Apt. #, etc.		Road 75	_	
			01072004 Chg-P CR2	E034 (10/03)
City & State	BUNNELL	FL	4. FEI Number 90-0132110	Applied For Not Applicable
Zip Country	32110	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
6. Name and Address of Current Re	egistered Agent		7. Name and Address of New Registers	
KNIĞHT, JERRY C 2825 N. OCEANSHORE BLVD		Name		
		Street Address	Street Address (P.O. Box Number is Not Acceptable)	
BEVERLY BEACH, FL 32136				
	پېستو چو د توکيلو د تا تم	City		Zip Code
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	d title if applicable. (NOTE:	Registered Agent signature requi	red when reinstating) DAT	IE .
	9. Election Campaig	on Financino \$	5.00 May Be	
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		bution, A	dded to Fees	
10. OFFICERS AND DI	IRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS /	AND DIRECTORS IN 11
TITLE NAME	☐ Delete	TITLE - D	PST ARREN G. WINTER	☐ Change 💢 Addition
STREET ADDRESS		STREET ADDRESS	ARREN G. WINTER 19 COUNTY ROAD 75	,
CITY-ST-ZIP			NNELL, FL 32110	Change Addition
TITLE NAME	☐ Delete	NAME SC	ott N. HOYT	Change Addition
STREET ADDRESS CITY-ST-7IP		STREET ADDRESS 1	45 SINGING SURF	2110
TITLE	☐ Delete	TITLE	EVERLY BEACH, FL 3	Change Addition
NAME		NAME		
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CITY-ST-ZIP TITLE NAME STREET ADDRESS	☐ Delete	TITLE NAME STREET ADDRESS		Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		/ ·

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 offer like empowered. WARREN G. WINTER, PRESIDENT 01-07-04 386 446-5890 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR