2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000018028

Entity Name: DLFISS SEAMLESS GUTTERS INC.

FILED Mar 12, 2007 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business:	New Principal Place of Business:
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5139 WILLARD NORRIS RD

8973 HIGHWAY 87 NORTH
MILTON, FL 32572

MILTON, FL 32570

Current Mailing Address: New Mailing Address:

5139 WILLARD NORRIS RD 8973 HIGHWAY 87 NORTH MILTON, FL 32572 MILTON, FL 32570

FEI Number: 20-0835998 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FISS, DEBORAH FISS, DEBORAH L
5139 WILLARD NORRIS RD 8973 HIGHWAY 87 NORTH
MILTON, FL 32572 US MILTON, FL 32570 US

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.

SIGNATURE: DEBORAH L. FISS 03/12/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 FISS, DEBORAH
 Name:
 FISS, DEBORAH L

 Address:
 5139 WILLARD NORRIS RD
 Address:
 8973 HIGHWAY 87 NORTH

 City-St-Zip:
 MILTON, FL 32572
 City-St-Zip:
 MILTON, FL 32570

Title: V () Delete Title: V (X) Change () Addition
Name: WALKER, LEE R
Name: WALKER, LEE R

 Address:
 5139 WILLARD NORRIS RD
 Address:
 8973 HIGHWAY 87 NORTH

 City-St-Zip:
 MILTON, FL 32572
 City-St-Zip:
 MILTON, FL 32570

Title: () Delete Title: V () Change (X) Addition

 Name:
 Name:
 SCULLY, JOSÉPH L

 Address:
 Address:
 6497 STUBB ROAD

 City-St-Zip:
 City-St-Zip:
 MILTON, FL 32570

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEBORAH L. FISS P 03/12/2007