

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000033097

FILED  
Jan 26, 2006  
Secretary of State

**Entity Name:** SUPERIOR SEAMLESS GUTTERS OF SOUTHWEST FLORIDA, INC.

**Current Principal Place of Business:**

4490 COMPTON LANE  
NORT PORT, FL 34287

**New Principal Place of Business:**

1090 INNOVATION AVENUE  
UNIT A112  
NORT PORT, FL 34289

**Current Mailing Address:**

4490 COMPTON LANE  
NORT PORT, FL 34287

**New Mailing Address:**

1090 INNOVATION AVENUE  
UNIT A112  
NORT PORT, FL 34289

**FEI Number:** 20-0775343

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

OAKS, DAVID K ESQ.  
4490 COMPTON LANE  
NORT PORT, FL 34287 US

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

OAKS, DAVID K ESQ.  
407 EAST MARION AVENUE  
SUITE 101  
PUNTA GORDA, FL 33950 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:**

01/26/2006

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( )**

**OFFICERS AND DIRECTORS:**

Title: PSTD ( ) Delete  
Name: BRIELMAIER, JEFF  
Address: 4490 COMPTON LANE  
City-St-Zip: NORT PORT, FL 34287

Title: V ( ) Delete  
Name: DENNIS, LAURA  
Address: 4490 COMPTON LANE  
City-St-Zip: NORT PORT, FL 34287

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR ( ) Change (X) Addition  
Name: ROBERTS, DONALD E 3RD  
Address: 8057 CASCADAS AVENUE  
City-St-Zip: NORTH PORT, FL 34287

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:** JEFF BRIELMAIER

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01/26/2006

Electronic Signature of Signing Officer or Director

Date