

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Mar 03, 2005 08:00 AM  
Secretary of State

DOCUMENT # P04000045778

1. Entity Name  
SCHWARTZ SEAMLESS GUTTERS INC.



Principal Place of Business  
278 BRASSINGTON DR.  
DEBARY, FL 32713 US

Mailing Address  
278 BRASSINGTON DR.  
DEBARY, FL 32713 US



01202005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number  
43-2045735

Applied For  
Not Applicable

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

## 6. Name and Address of Current Registered Agent

SCHWARTZ, VICKI S  
278 BRASSINGTON DR.  
DEBARY, FL 32713

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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**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

## 10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SCHWARTZ, VICKI S
STREET ADDRESS	278 BRASSINGTON DR.
CITY- ST- ZIP	DEBARY, FL 32713
TITLE	VP
NAME	SCHWARTZ, RAY A SR.
STREET ADDRESS	278 BRASSINGTON DR.
CITY- ST- ZIP	DEBARY, FL 32713
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

000000249855  
03/03/05-80019-022 150.00

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IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Vicki S. Schwartz* Vicki S. Schwartz  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-28-05 386-775-2411  
Date Daytime Phone #