2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000151531

Name:

Address: City-St-Zip:

Entity Name: JEFFREY G. JANSEN SEAMLESS GUTTERS. INC

FILED Feb 14, 2006 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:			
22445 EAGLES WATCH DR. LAND O' LAKES, FL 34639				22445 EAGLES WATCH DRIVE LAND O' LAKES, FL 34639			
Current Mailing Address:				New Mailing Address:			
22445 EAGLES WATCH DR. LAND O' LAKES, FL 34639				22445 EAGLES WATCH DRIVE LAND O' LAKES, FL 34639			
FEI Number:	80-0128134	FEI Number Applied For()	FEI Numbe	er Not Appli	cable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
JANSEN, ANNE P 17409 CRICKET CHIRP LOOP LAND O' LAKES, FL 34638 US				JANSEN, ANNE P 22445 EAGLES WATCH DRIVE LAND O' LAKES, FL 34639 US			
The above in the State		submits this statement for the	purpose of c	hanging it	s register	ed office or registered agent, or both,	
SIGNATURE: ANNE P. JANSEN				02/14/2006			
Election Can		ic Signature of Registered Aggrund Trust Fund Contribution ().	ent			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	JANSEN, JEFF	T CHIRP LOOP	Na Ad	tle: ame: ddress: ity-St-Zip:	22445 EA	(X) Change () Addition JEFFREY G GLES WATCH DRIVE AKES, FL 34639	
Title: Name: Address: City-St-Zip:	JANSEN, ANNE 17409 CRICKE	T CHIRP LOOP	Na Ad	tle: ame: ddress: ity-St-Zip:		(X) Change () Addition ANNE P GLES WATCH DRIVE AKES, FL 34639	
Title:	(Delete	Tit	tle:	D	() Change (X) Addition	

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.

Name:

Address:

City-St-Zip:

REESE, MARK A

17437 CRICKET CHIRP LOOP

LAND O' LAKES, FL 34638

SIGNATURE: ANNE P. JANSEN V 02/14/2006