

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000151942

Entity Name: AL'S HURRICANE SHUTTER CO

FILED  
Apr 17, 2009  
Secretary of State

## Current Principal Place of Business:

5719 FIG ROAD  
SEBRING, FL 33875

## New Principal Place of Business:

5268 N. HUCKELBERRY LAKE DR  
SEBRING, FL 33875

## Current Mailing Address:

5268 N HUCKLEBERRY LAKE DR  
SEBRING, FL 33875

## New Mailing Address:

5268 N. HUCKELBERRY LAKE DR  
SEBRING, FL 33875

FEI Number: 20-1880554

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ALL FLORIDA FIRM INC  
813 DELTONA BLVD  
ST A  
DELTONA, FL 32725 US

## Name and Address of New Registered Agent:

GONZALES, ALAN P PRESS  
5268 N. HUCKLEBERRY LAKE DR  
SEBRING, FL 33875 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: ALAN P GONZALES

04/17/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: GONZALES, ALAN P  
Address: 5719 FIG ROAD  
City-St-Zip: SEBRING, FL 33875

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: GONZALES, ALAN P  
Address: 5268 N. HUCKLEBERRY LAKE DR  
City-St-Zip: SEBRING, FL 33875

Title: OFF ( ) Change (X) Addition  
Name: GONZALES, TONY L OFF  
Address: 9424 NW 19 PLACE  
City-St-Zip: SUNRISE, FL 33322 BR

I hereby certify that the information supplied with this filing does not qualify 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: ALAN P GONZALES

PRES

04/17/2009

Electronic Signature of Signing Officer or Director

Date