

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000017211

FILED  
Jan 23, 2008  
Secretary of State

**Entity Name:** GILMORE CONSTRUCTION & REMODELING, INC.

**Current Principal Place of Business:**

860 NATURE'S COVE ROAD  
DANIA BEACH, FL 33004

**New Principal Place of Business:**

**Current Mailing Address:**

860 NATURE'S COVE ROAD  
DANIA BEACH, FL 33004

**New Mailing Address:**

**FEI Number:** 20-0246274

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WASSERSTROM, ELLEN  
GREENSPOON, MARDER, HIRSCHFELD, ET AL P.A.  
100 W. CYPRESS CREEK RD., SUITE 700  
FORT LAUDERDALE, FL 33309 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

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

**OFFICERS AND DIRECTORS:**

**Title:** D ( ) Delete  
**Name:** GILMORE, SHAWN  
**Address:** 860 NATURES COVE ROAD  
**City-St-Zip:** DANIA BEACH, FL 33004

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

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

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:** SHAWN GILMORE

PRES

01/23/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date