

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000041604

FILED  
Mar 03, 2009  
Secretary of State

Entity Name: GLADES ARES BAIL BONDS, INC

## Current Principal Place of Business:

36 E HICKPOOCHEE AVE  
LABELLE, FL 33935 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 2445  
LABELLE, FL 33975 US

## New Mailing Address:

FEI Number: 20-1348898

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JAMESON, KIRK A  
36 E HICKPOOCHEE AVE  
LABELLE, FL 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: PSVT ( ) Delete  
Name: JAMESON, KIRK  
Address: P.O. BOX 2445  
City-St-Zip: LABELLE, FL 33975

Title: D ( ) Delete  
Name: JAMESON, KIRK  
Address: P.O. BOX 2445  
City-St-Zip: LABELLE, FL 33975

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: KIRK A. JAMESON

OWNE

03/03/2009

Electronic Signature of Signing Officer or Director

Date