

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000101614

FILED
Jan 12, 2006
Secretary of State

Entity Name: ZACHARY GROVE GUTTERS, INC.

Current Principal Place of Business:

2775 CYRUS AVENUE
NORTH PORT, FL 34288 US

New Principal Place of Business:

1458 JUSTICA STREET
NORTH PORT, FL 34288 US

Current Mailing Address:

2775 CYRUS AVENUE
NORTH PORT, FL 34288 US

New Mailing Address:

1458 JUSTICA STREET
NORTH PORT, FL 34288 US

FEI Number: 20-3179063

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GROVE, ZACHARY B
2775 CYRUS AVENUE
NORTH PORT, FL 34288 US

Name and Address of New Registered Agent:

GROVE, ZACHARY B
1458 JUSTICA STREET
NORTH PORT, FL 34288 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: ZACHARY B GROVE

01/12/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GROVE, ZACHARY B
Address: 2775 CYRUS AVENUE
City-St-Zip: NORTH PORT, FL 34288 US

Title: S/T () Delete
Name: GROVE, ALISON B
Address: 2775 CYRUS AVENUE
City-St-Zip: NORTH PORT, FL 34288 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GROVE, ZACHARY B
Address: 1458 JUSTICA STREET
City-St-Zip: NORTH PORT, FL 34288 US

Title: S/T (X) Change () Addition
Name: GROVE, ALISON B
Address: 1458 JUSTICA STREET
City-St-Zip: NORTH PORT, FL 34288 US

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.

SIGNATURE: ALISON B GROVE

S/T

01/12/2006

Electronic Signature of Signing Officer or Director

Date