2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2009
Secretary of State

DOCUMENT# P05000122932

Entity Name: GUARDIAN COMMUNITY RESOURCE MANAGEMENT, INC.

Current Principal Place of Business:

2040 ISOLA LANE
GROVELAND, FL 34736 US

New Principal Place of Business:

Current Mailing Address:

506 N. ALEXANDER ST.
PLANT CITY, FL 33563

New Mailing Address:

FEI Number: 13-4309252 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GALLOWAY, DAVID H.
506 N. ALEXANDER ST.
PLANT CITY, FL 33563 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: PD ( ) Delete
Name: ALDAY, CHRISTINE M
Address: 2040 ISOLA LANE
City-St-Zip: GROVELAND, FL 34736

Title: CEO ( ) Delete
Name: ALDAY, CORBETT
Address: 2040 ISOLA LANE
City-St-Zip: GROVELAND, FL 34736

Title: D ( ) Delete
Name: GALLOWAY, DAVID H
Address: 506 N ALEXANDER STREET
City-St-Zip: PLANT CITY, FL 33563

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: CEO (X) Change ( ) Addition
Name: ALDAY, CHRISTINE M
Address: 2040 ISOLA LANE
City-St-Zip: GROVELAND, FL 34736

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

Title: VP ( ) Change (X) Addition
Name: ALDAY, CORBETT
Address: 2040 ISOLA LANE
City-St-Zip: GROVELAND, FL 34736

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: DAVID H. GALLOWAY D 03/19/2009
Electronic Signature of Signing Officer or Director Date