

# **2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P05000150313

**FILED**  
**May 21, 2007**  
**Secretary of State**

**Entity Name:** CLEAR SHIELD OF CHARLOTTE COUNTY, INC.

**Current Principal Place of Business:**

6035 TAYLOR ROAD  
#7  
PUNTA GORDA, FL 33950

**New Principal Place of Business:**

**Current Mailing Address:**

6035 TAYLOR ROAD  
#7  
PUNTA GORDA, FL 33950

**New Mailing Address:**

**FEI Number:** 20-3772765      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

MATTHEW, JAMES R  
22212 MONTROSE AVE  
PORT CHARLOTTE, FL 33952      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

**OFFICERS AND DIRECTORS:**

**Title:** PSTD      ( ) Delete  
**Name:** BAKER, RON  
**Address:** 1560 AQUI ESTA  
**City-St-Zip:** PUNTA GORDA, FL 33950

**Title:** VD      ( ) Delete  
**Name:** BAKER, DEBORAH L  
**Address:** 1560 AQUI ESTA  
**City-St-Zip:** PUNTA GORDA, FL 33950

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

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

**Title:** PTD      (X) Change ( ) Addition  
**Name:** BAKER, RON  
**Address:** 1560 AQUI ESTA  
**City-St-Zip:** PUNTA GORDA, FL 33950

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

**Title:** S      ( ) Change (X) Addition  
**Name:** WANKE, CHRISTOPHER A  
**Address:** 2401 NW 9TH AVENUE  
**City-St-Zip:** CAPE CORAL, FL 33993

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:** RON BAKER

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

PTD

05/21/2007

\_\_\_\_\_  
Date