

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000150313

FILED  
Apr 29, 2008  
Secretary of State

Entity Name: CLEAR SHIELD OF CHARLOTTE COUNTY, INC.

## Current Principal Place of Business:

6035 TAYLOR ROAD  
#7  
PUNTA GORDA, FL 33950

## Current Mailing Address:

6035 TAYLOR ROAD  
#7  
PUNTA GORDA, FL 33950

## New Principal Place of Business:

23250 HARPER AVENUE  
#3  
PORT CHARLOTTE, FL 33980

## New Mailing Address:

23250 HARPER AVENUE  
#3  
PORT CHARLOTTE, FL 33980

FEI Number: 20-3772765

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## 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:

MARSHALL, PAUL  
3472 DEPEW AVENUE  
PORT CHARLOTTE, FL 33952 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: PAUL MARSHALL

04/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

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

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

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: BAKER, RON P  
Address: 4420 PELICAN POINTE DRIVE  
City-St-Zip: PUNTA GORDA, FL 33950

Title: VD (X) Change ( ) Addition  
Name: BAKER, DEBORAH L  
Address: 4420 PELICAN POINTE DRIVE  
City-St-Zip: PUNTA GORDA, FL 33950

Title: S (X) Change ( ) Addition  
Name: WANKE, CHRISTOPHER A  
Address: 4420 PELICAN POINTE DRIVE  
City-St-Zip: PUNTA GORDA, FL 33950

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: DEBORAH L. BAKER

VD

04/29/2008

Electronic Signature of Signing Officer or Director

Date