

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000167541

FILED
Jan 20, 2009
Secretary of State

Entity Name: GENERATIONS METIER, INC.

Current Principal Place of Business:

2818 NW 43RD PLACE
CAPE CORAL, FL 33993

New Principal Place of Business:

Current Mailing Address:

2818 NW 43RD PLACE
CAPE CORAL, FL 33993

New Mailing Address:

FEI Number: 35-2265478 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORROW, STEPHEN D
2818 NW 43RD PLACE
CAPE CORAL, FL 33993 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: D/P () Delete
Name: MORROW, STEPHEN
Address: 2818 NW 43RD PLACE
City-St-Zip: CAPE CORAL, FL 33993

Title: O () Delete
Name: MORROW, JUSTIN C
Address: 101 N.W. 25TH AVE
City-St-Zip: CAPE CORAL, FL 33993

Title: V () Delete
Name: MORROW, NATHAN D
Address: 836 WHISPERING PINES RD
City-St-Zip: CAPE CORAL, FL 33993

Title: S () Delete
Name: MORROW, MATTHEW S
Address: 3616 SW 7TH PLACE
City-St-Zip: CAPE CORAL, FL 33914

Title: GM () Delete
Name: MORROW, CAROL C
Address: 2818 N.W. 43RD PLACE
City-St-Zip: CAPE CORAL, FL 33993

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: S (X) Change () Addition
Name: MORROW, MATTHEW S
Address: 3616 SW 4TH LANE
City-St-Zip: CAPE CORAL, FL 33914

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: STEPHEN D. MORROW

P

01/20/2009

Electronic Signature of Signing Officer or Director

Date