

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2008 08:00 A
Secretary of State

DOCUMENT # P06000080961	
1. Entity Name GUARDIAN STORM PANELS, INC.	

Principal Place of Business 4953 BERKELEY FOREST BLVD. GULF BREEZE, FL 32563 US	Mailing Address 4953 BERKELEY FOREST BLVD. GULF BREEZE, FL 32563 US
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01092008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-5095410	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

HICKEY, RAYMOND G
913 GULF BREEZE PARKWAY
SUITE 5
GULF BREEZE, FL 32561

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	000000833798 02/28/08-80027-005 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS FILLINGER, EDITH D 4953 BERKELEY FOREST BLVD. GULF BREEZE, FL 32563
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Edith D. Fillinger, President 2-19-08 8832-9990
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #