2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000130982

Title:

Name:

Address:

City-St-Zip:

FILED Jan 21, 2009 Secretary of State

| Entity Name: T & G CARPORTS & SHEDS CORP. | | | | | | |
|--|--|---------------------------------|---|--|-----------------------------------|--|
| Current Principal Place of Business: | | | New Princi | New Principal Place of Business: | | |
| 1509 BOWM. PLANT CITY | | US | | | | |
| Current Mailing Address: | | | New Mailir | New Mailing Address: | | |
| 1509 BOWM PLANT CITY | | US | | | | |
| FEI Number: 06 | 6-1795780 | FEI Number Applied For () | FEI Number Not Appli | cable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and | Name and Address of New Registered Agent: | | |
| GRIFFIN, CLARK SR 4405 MULRENNAN RD VALRICO, FL 33894 US | | | 4405 MULR | GRIFFIN, CLARK L SR 4405 MULRENNAN RD VALRICO, FL 33894 US | | |
| The above na in the State o | | bmits this statement for the pu | rpose of changing it | s registered off | ïce or registered agent, or both, | |
| SIGNATURE: LORI A. TYSON' SPIKER | | | | 01/21/2009 | | |
| Electronic Signature of Registered Agent | | | t | | Date | |
| Election Campa | aign Financing 1 | rust Fund Contribution (). | | | | |
| OFFICERS AND DIRECTORS: | | | ADDITION | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| | | | | | | |
| Name: C Address: 4 | PD () D GRIFFIN, CLARK 440 S. MULRENN VALRICO, FL 33: | AN ROAD | Title: Name: Address: City-St-Zip: | ()(| Change()Addition | |
| Name: CAddress: 4 City-St-Zip: Name: Name: Address: 4 | GRIFFIN, CLÀRK 140 S. MULRENN VALRICO, FL 33: | IAN ROAD 594 US elete | Name: Address: | | Change()Addition Change()Addition | |

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 an an enterphase with an eddress with all other like empowered. above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: LORI A. TYSON' SPIKER TD 01/21/2009

(X) Delete

SPIKER, LORI

4650 EASTWIND DRIVE

PLANT CITY, FL 33566

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