

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000027426

Entity Name: GUARDIAN MEDICAL INC

FILED
Mar 24, 2009
Secretary of State

Current Principal Place of Business:

4553 MARIOTTI CT
SARASOTA, FL 34233

New Principal Place of Business:

4553 MARIOTTI CT
SUITE 102
SARASOTA, FL 34233

Current Mailing Address:

4553 MARIOTTI CT
SARASOTA, FL 34233

New Mailing Address:

4553 MARIOTTI CT
SUITE 102
SARASOTA, FL 34233

FEI Number: 20-8585485

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEAN, WILLIAM A
2122 LUSITANIA DR
SARASOTA, FL 34231 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: P () Delete
Name: DEAN, WILLIAM A
Address: 2122 LUSITANIA DR
City-St-Zip: SARASOTA, FL 34231

Title: VP () Delete
Name: MILLER, STEVEN S
Address: 4950 SABLE LAKE CIR
City-St-Zip: SARASOTA, FL 34232

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: WILLIAM A DEAN

P

03/24/2009

Electronic Signature of Signing Officer or Director

_____ Date