

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000095308

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Entity Name:** FLORIDA GUILD OF PROFESSIONAL CHIMNEY SWEEPS, INC.

**Current Principal Place of Business:**

165 WELLS ROAD  
SUITE 105  
ORANGE PARK, FL 32073

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 557  
MIDDLEBURG, FL 32050

**New Mailing Address:**

**FEI Number:** 26-0809833

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BAKER, KATHY S E.A.  
165 WELLS ROAD  
SUITE 105  
ORANGE PARK, FL 32073 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: HUDSON, W MARK II  
Address: PO BOX 557  
City-St-Zip: MIDDLEBURG, FL 32050

Title: T  
Name: ELLIS, GEORGE  
Address: 3290 PHONETIA DRIVE  
City-St-Zip: DELTONA, FL 32738

I hereby 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 all other like empowered.

SIGNATURE: W MARK HUDSON II

PRES

04/30/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date