

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000081554

Entity Name: GILLS BOWYER, INC.

FILED  
Jan 19, 2009  
Secretary of State

## Current Principal Place of Business:

43309 US HIGHWAY 19 NORTH  
TARPON SPRINGS, FL 34689

## New Principal Place of Business:

43309 US HIGHWAY 19 N  
TARPON SPRINGS, FL 34689

## Current Mailing Address:

43309 US HIGHWAY 19 NORTH  
TARPON SPRINGS, FL 34689

## New Mailing Address:

P O BOX 1608  
TARPON SPRINGS, FL 346881608

FEI Number: 26-3464866

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FRIEDLAND, LEW  
43309 US HIGHWAY 19 NORTH  
TARPON SPRINGS, FL 34689 US

## Name and Address of New Registered Agent:

FRIEDLAND, LEW  
43309 US HIGHWAY 19 N  
TARPON SPRINGS, FL 34689 US

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:

01/19/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: FRIEDLAND, LEW  
Address: 43309 US HIGHWAY 19 NORTH  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: VPST ( ) Delete  
Name: FORD, DAVID  
Address: 43309 US HIGHWAY 19 NORTH  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: FRIEDLAND, LEW  
Address: 43309 US HIGHWAY 19 N  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: VPST (X) Change ( ) Addition  
Name: FORD, DAVID  
Address: 43309 US HIGHWAY 19 N  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: D ( ) Change (X) Addition  
Name: GILLS, JAMES P  
Address: 43309 US HIGHWAY 19 N  
City-St-Zip: TARPON SPRINGS, FL 34689 US

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: LEW FRIEDLAND

P

01/19/2009

Electronic Signature of Signing Officer or Director

Date