

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000033169

FILED  
Apr 16, 2012  
Secretary of State

**Entity Name:** GUTTERS AND SCREEN ENCLOSURES INC.

**Current Principal Place of Business:**

10051 GOSHAWK DR E  
JACKSONVILLE, FL 32257

**New Principal Place of Business:**

**Current Mailing Address:**

10051 GOSHAWK DR E  
JACKSONVILLE, FL 32257

**New Mailing Address:**

**FEI Number:** 26-4667126

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JONES, TRAVIS L  
10051 GOSHAWK DR E  
JACKSONVILLE, FL 32257 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:** JONES, TRAVIS L  
**Address:** 10051 GOSHAWK DR E  
**City-St-Zip:** JACKSONVILLE, FL 32257

**Title:** VP  
**Name:** ALEJANVRO, GOMEZ  
**Address:** 4915 BAYMEADOWS ROAD, APT H 2  
**City-St-Zip:** JACKSONVILLE, FL 32217

**Title:** S  
**Name:** MCILVAINE, KENNETH S  
**Address:** 10059 GOSHAWK DR E  
**City-St-Zip:** JACKSONVILLE, FL 32257

**Title:** VP  
**Name:** MCCOY, CHRISTIAN  
**Address:** 10059 GOSHAWK DR E  
**City-St-Zip:** JACKSONVILLE, FL 32257

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:** TRAVIS JONES

P

04/16/2012

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

\_\_\_\_\_  
Date