

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000050302

FILED  
Mar 05, 2012  
Secretary of State

**Entity Name:** GARAGE DOOR REPAIR EXPERTS INC

**Current Principal Place of Business:**

11555 CENTRAL PARKWAY, SUITE 804  
JACKSONVILLE, FL 32224

**New Principal Place of Business:**

**Current Mailing Address:**

11555 CENTRAL PARKWAY, SUITE 804  
JACKSONVILLE, FL 32224

**New Mailing Address:**

**FEI Number:** 45-2440742

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DAVIS, JOHN D  
4543 WESCONNETT BLVD  
JACKSONVILLE, FL 32210 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: ECKES, DAVID  
Address: 11555 CENTRAL PARKWAY, STE 804  
City-St-Zip: JACKSONVILLE, FL 32224

Title: CFO  
Name: FEELY, SCOTT  
Address: 11555 CENTRAL PARKWAY, STE 804  
City-St-Zip: JACKSONVILLE, FL 32224

Title: VP  
Name: KIM, DORON  
Address: 11555 CENTRAL PARKWAY, STE 804  
City-St-Zip: JACKSONVILLE, FL 32224

Title: CTO  
Name: PEREZ, DAVE  
Address: 11555 CENTRAL PARKWAY, STE 804  
City-St-Zip: JACKSONVILLE, FL 32224

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: DAVID ECKES

P

03/05/2012

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

\_\_\_\_\_  
Date