

**FOR PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Apr 26, 2006 8:00 am
Secretary of State

04-26-2006 90221 018 ***150.00

DOCUMENT # **P 93000008692**

1. Entity Name

GUARDIAN MARINE SERVICES, INC



DO NOT WRITE IN THIS SPACE

120036059

2. Principal Place of Business

2335 SW MANOR HILL DR

3. Mailing Address

2335 SW MANOR HILL DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PALM CITY, FL

City & State

PALM CITY, FL

4. FEI Number

59-3165349

Applied For

Not Applicable

Zip

34990

Country

USA

Zip

34990

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

CR2E034B (8/05)

7. Name and Address of Current Registered Agent

Name

EVANS LL SISMANSO

Street Address (P.O. Box Number is Not Acceptable)

2335 SW MANOR HILL DR

City

PALM CITY

FL

Zip Code 34990

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Evans L Sismanson

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

April 23, 2006

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended AR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PRESIDENT
EVANS LL SISMANSO
2335 SW MANOR HILL DR
PALM CITY, FL 34990**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: **X**

Evans L Sismanson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/06

Date

772-221-0327

Daytime Phone #