

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000036422

**FILED**  
**Apr 24, 2008**  
**Secretary of State**

**Entity Name:** GARAGE DOOR PROFESSIONALS, INC.

**Current Principal Place of Business:**

10475 66 STREET N  
PINELLAS PARK, FL 33782 US

**New Principal Place of Business:**

8374 MARKET STREET #480  
LAKEWOOD RANCH, FL 34202 US

**Current Mailing Address:**

8374 MARKET STREET  
480  
LAKEWOOD RANCH, FL 34202 US

**New Mailing Address:**

8374 MARKET STREET #480  
LAKEWOOD RANCH, FL 34202 US

**FEI Number:** 59-3322278

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRANCH, TINA MARIE VP, TRES  
8004 261 STREET EAST  
MYAKKA CITY, FL 34251 US

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

SCHRIEFER, GEORGE ESQUIRE  
6075 PARK BLVD SUITE: A  
PINELLAS PARK, FL 33781 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: TINA M BRANCH

04/24/2008

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BRANCH, JR, THOMAS W  
Address: 8004 261 STREET EAST  
City-St-Zip: MYAKKA CITY, FL 34251

Title: STVD ( ) Delete  
Name: BRANCH, TINA M  
Address: 8004 261 STREET EAST  
City-St-Zip: MYAKKA CITY, FL 34251

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: TINA M BRANCH

VP

04/24/2008

Electronic Signature of Signing Officer or Director

Date