

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000053910

FILED
Apr 27, 2005
Secretary of State

Entity Name: GUNN'S SPECIALTY GLASS, INC.

Current Principal Place of Business:

21 N. LOXAHATCHEE DRIVE
JUPITER, FL 33458

New Principal Place of Business:

Current Mailing Address:

21 N. LOXAHATCHEE DRIVE
JUPITER, FL 33458

New Mailing Address:

FEI Number: 65-0691760

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLANEY, JERRI M
11380 PROSPERITY FARMS ROAD, SUITE 203
PALM BEACH GARDENS, FL 33410 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GUNN, KEVIN
Address: 80 PINEHILL TRAIL EAST
City-St-Zip: TEQUESTA, FL 33469

Title: VP () Delete
Name: GUNN, CHRISTOPHER
Address: 50 WOODLAND DRIVE
City-St-Zip: TEQUESTA, FL 33469

Title: S () Delete
Name: GUNN, ANN
Address: 50 WOODLAND DRIVE
City-St-Zip: TEQUESTA, FL 33469

Title: T () Delete
Name: GUNN, ELIZABETH
Address: 80 PINEHILL TRAIL EAST
City-St-Zip: TEQUESTA, FL 33469

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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 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: ELIZABETH GUNN

TRES

04/27/2005

Electronic Signature of Signing Officer or Director

Date