

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000030189

Entity Name: GUARDIAN REPORTING, INC.

FILED
Mar 22, 2006
Secretary of State

Current Principal Place of Business:

315 TAYLOR STREET
PUNTA GORDA, FL 33950

New Principal Place of Business:

18245 PAULSON DRIVE
SUITE 116
PORT CHARLOTTE, FL 33954

Current Mailing Address:

315 TAYLOR STREET
PUNTA GORDA, FL 33950

New Mailing Address:

POST OFFICE BOX 510186
PUNTA GORDA, FL 33951

FEI Number: 65-0824816

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LABOR, LINDA A
315 TAYLOR ST
PUNTA GORDA, FL 33950 US

Name and Address of New Registered Agent:

LABOR, LINDA A
18245 PAULSON DRIVE
SUITE 116
PORT CHARLOTTE, FL 33954 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: LINDA A. LABOR

03/22/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LABOR, LINDA A
Address: 315 TAYLOR STREET
City-St-Zip: PUNTA GORDA, FL 33950

Title: STD () Delete
Name: ROLLINS, LISA M
Address: 315 TAYLOR STREET
City-St-Zip: PUNTA GORDA, FL 33950

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LABOR, LINDA A
Address: 18245 PAULSON DRIVE, STE. 116
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: STD (X) Change () Addition
Name: ROLLINS, LISA M
Address: 18245 PAULSON DRIVE, STE. 116
City-St-Zip: PORT CHARLOTTE, FL 33954

I hereby certify that the information supplied with this filing does not qualify for the 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: LINDA A. LABOR

PD

03/22/2006

Electronic Signature of Signing Officer or Director

Date