

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# S21162

Entity Name: GLS CONSTRUCTION SERVICES, INC.

FILED
Nov 24, 2009
Secretary of State

Current Principal Place of Business:

350 49TH ST. S
ST. PETERSBURG, FL 33707 US

New Principal Place of Business:

Current Mailing Address:

350 49TH ST. S
ST. PETERSBURG, FL 33707 US

New Mailing Address:

FEI Number: 65-0249518 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAYNES, ERIN MICHELLE
350 49TH ST. S
ST. PETERSBURG, FL 33707 US

Name and Address of New Registered Agent:

SUETHOLZ, PAMELA A
350 49TH ST. S
ST. PETERSBURG, FL 33707 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: PAMELA A SUETHOLZ

11/24/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HAYNES, ERIN M
Address: 350 49TH ST. S
City-St-Zip: ST. PETERSBURG, FL 33707 US

Title: PVP () Delete
Name: SUETHOLZ, PAMELA A
Address: 350 49TH ST. S
City-St-Zip: ST. PETERSBURG, FL 33707 US

Title: VS DT (X) Delete
Name: SUETHOLZ, GERALD L
Address: 316 14TH AVE NE
City-St-Zip: ST. PETERSBURG, FL 33701 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SUETHOLZ, PAMELA A
Address: 350 49TH ST. S
City-St-Zip: ST. PETERSBURG, FL 33707 US

Title: VS DT (X) Change () Addition
Name: HAYNES, ERIN M
Address: 350 49TH ST. S
City-St-Zip: ST. PETERSBURG, FL 33707 US

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: PAMELA A SUETHOLZ

PD

11/24/2009

Electronic Signature of Signing Officer or Director

Date