## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V61142

FILED Mar 17, 2009 Secretary of State

Entity Name: CUSTOM GUTTERS OF HILLSBOROUGH, INC.

**Current Principal Place of Business: New Principal Place of Business:** 6517 N ARMENIA 7814 N. ARMENIA AVENUE TAMPA, FL 33604 TAMPA, FL 33604 **Current Mailing Address: New Mailing Address:** 6517 N ARMENIA 7814 N ARM.ENIA AVENUE TAMPA, FL 33604 TAMPA, FL 33604 FEI Number: 59-3140785 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DAWSON, WILLIAM F 16025 CHÁSTAIN RD ODESSA, FL 33556 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition SHERMAN, THERESA H., Name: Name: 16025 CHASTAIN RD Address: Address: City-St-Zip: ODESSA, FL 33556 City-St-Zip: Title: Title: () Change () Addition () Delete DAWSON, WILLIAM F., Name: Name: 16025 CHASTAIN RD Address: Address: ODESSA, FL 33556 City-St-Zip: 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: WILLIAM F. DAWSON D 03/17/2009