

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 631037

FILED  
Apr 20, 2009  
Secretary of State

Entity Name: CONTINENTAL WINDOWS AND GLASS, INC.

**Current Principal Place of Business:**

4653 L. B. MCLEOD ROAD, SUITE A  
ORLANDO, FL 32811

**New Principal Place of Business:**

**Current Mailing Address:**

4653 L. B. MCLEOD ROAD, SUITE A  
ORLANDO, FL 32811

**New Mailing Address:**

FEI Number: 59-1962524      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

GRINEVICIUTE, RUTA  
4653 L. B. MCLEOD ROAD, SUITE A  
ORLANDO, FL 32811      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: P ( ) Delete  
Name: MIRANDA, JOHN  
Address: 4653 L.B. MCLEOD ROAD, SUITE A  
City-St-Zip: ORLANDO, FL 32811

Title: VST ( ) Delete  
Name: GRINEVICIUTE, RUTA  
Address: 4653 L.B. MCLEOD ROAD, SUITE A  
City-St-Zip: ORLANDO, FL 32811

Title: V ( ) Delete  
Name: LEOMBRUNO, KEITH  
Address: 4653 L.B. MCLEOD ROAD, SUITE A  
City-St-Zip: ORLANDO, FL 32811

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

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

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

Title: V (X) Change ( ) Addition  
Name: HARRINGTON, PATRICK  
Address: 4653 L.B. MCLEOD ROAD, SUITE A  
City-St-Zip: ORLANDO, FL 32811

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: RUTA GRINEVICIUTE

VST

04/20/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date