


**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**May 26, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L03000027538**  
 1. Entity Name  
**CONTINENTAL WINDOW & DOOR OF FLORIDA, LLC**



Principal Place of Business      Mailing Address  
**225 WEST ILLINOIS STREET, SUITE 300**      **225 WEST ILLINOIS STREET, SUITE 300**  
**CHICAGO, IL 60610**      **CHICAGO, IL 60610**

**DO NOT WRITE IN THIS SPACE**



01132006No Chg-LLC      CR2E083 (11/05)

4. FEI Number      Applied For  
**51-0477147**      Not Applicable

5. Certificate of Status Desired       **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY**  
**1201 HAYS STREET**  
**TALLAHASSEE, FL 32301-2525**

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00**  
**Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR CONTINENTAL WINDOW & DOOR OF FLORIDA, INC. 225 WEST ILLINOIS ST SUITE 300 CHICAGO, IL 60610
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 05/26/06-80003-001 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Warren Kaga      Date: 5/11/06  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE