

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001468

**FILED
Apr 19, 2004
Secretary of State**

Entity Name: ASSOCIATION OF SHUTTER MANUFACTURERS, INC.

Current Principal Place of Business:

8800 N.W. 79TH AVE.,
MEDLEY, FL 33166

New Principal Place of Business:

PO BOX 126100
HIALEAH, FL 33012

Current Mailing Address:

8800 N.W. 79TH AVE.,
MEDLEY, FL 33166

New Mailing Address:

PO BOX 126100
HIALEAH, FL 33012

FEI Number: 65-0650711

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PALMIERI, THOMAS J ESQ.
201 SOUTH BISCAYNE BLVD
SUITE 3000
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

BERGER, JAMES
350 EAST LAS OLAS BLVD. #1000
FT. LAUDERDALE, FL 33301 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: JAMES BERGER

04/19/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BECKER, LENNARD
Address: 8800 N.W. 79TH AVENUE
City-St-Zip: MEDLEY, FL 33166

Title: D () Delete
Name: DIAZ, ROSARIO
Address: 8800 NW 79TH AVE
City-St-Zip: MEDLEY, FL 33166

Title: D () Delete
Name: SPENCER, DOREEN
Address: 8800 NW 79TH AVE
City-St-Zip: MEDLEY, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BECKER, LENNARD
Address: PO BOX 126100
City-St-Zip: HIALEAH, FL 33012

Title: D (X) Change () Addition
Name: DIAZ, ROSARIO
Address: PO BOX 126100
City-St-Zip: HIALEAH, FL 33012

Title: D (X) Change () Addition
Name: SPENCER, DOREEN
Address: PO BOX 126100
City-St-Zip: HIALEAH, FL 33012

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LENNARD BECKER

PD

04/19/2004

Electronic Signature of Signing Officer or Director

Date