


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P00000055307
1. Entity Name
VETITOE VINYL SIDING, INC.



Principal Place of Business
9924 AILERON AVENUE
PENSACOLA, FL 32506-9507

Mailing Address
9924 AILERON AVENUE
PENSACOLA, FL 32506-9507

DO NOT WRITE IN THIS SPACE



01092006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3653243

Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
VETITOE, ROBERT J
9924 AILERON AVENUE
PENSACOLA, FL 32506-9507

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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)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

000000412790
02/10/06-80062-010 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PO VETITOE, ROBERT J 9924 AILERON AVENUE PENSACOLA, FL 325069507
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD VETITOE, BOBBY K JR 9924 AILERON AVENUE PENSACOLA, FL 325069507
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD MOORE, WILLIAM C III 9924 AILERON AVENUE PENSACOLA, FL 325069507
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12. 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 or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert Vettitoe 1-9-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #