

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000079851

**FILED**  
**Apr 10, 2006**  
**Secretary of State**

**Entity Name:** AMERIPRO GARGAGE DOORS OF NORTHWEST FLORIDA, INC.

**Current Principal Place of Business:**

711 SKUNKVALLEY ROAD  
SOUTHPORT, FL 32409

**New Principal Place of Business:**

**Current Mailing Address:**

711 SKUNKVALLEY ROAD  
SOUTHPORT, FL 32409

**New Mailing Address:**

FEI Number: 59-3663067

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KELLEY, STEVEN SCOTT  
711 SKUNKVALLEY ROAD  
SOUTHPORT, FL 32409 US

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

KELLEY, STEVEN S P  
711 SKUNKVALLEY ROAD  
SOUTHPORT, FL 32409 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: STEVEN S. KELLEY

04/10/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: KELLEY, STEVE SCOTT  
Address: 711 SKUNKVALLEY ROAD  
City-St-Zip: SOUTHPORT, FL 32409

Title: VP ( ) Delete  
Name: KELLEY, ROBIN RENAE  
Address: 711 SKUNKVALLEY ROAD  
City-St-Zip: SOUTHPORT, FL 32409

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

Title: P (X) Change ( ) Addition  
Name: KELLEY, STEVEN S P  
Address: 711 SKUNKVALLEY ROAD  
City-St-Zip: SOUTHPORT, FL 32409

Title: VP (X) Change ( ) Addition  
Name: KELLEY, ROBIN R VP  
Address: 711 SKUNKVALLEY ROAD  
City-St-Zip: SOUTHPORT, FL 32409

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBIN R. KELLEY

VP

04/10/2006

Electronic Signature of Signing Officer or Director

Date