## **2005 FOR PROFIT CORPORATION** ANNUAL REPORT

SIGNATURE:

## Apr 20, 2005 8:00 am Secretary of State **DOCUMENT # P04000005127** 1. Entity Name 04-20-2005 90331 041 \*\*\*150.00 MOULTON EXTERIORS, INC. Principal Place of Business Mailing Address 2238 DANFORTH RD 2238 DANFORTH RD 50039760 SPRINGHILL, FL 34608 SPRINGHILL, FL 34608 3. Mailing Address DOY. Suite, Apt. #, etc. 04102005 Chg-P CR2E034 (10/03) 4. FEI Number Applied For Olty & State H. 16 HTS Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired П 656 ISA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JONES, JAMES R JR 11120 LIBBY RD SPRINGHILL, FL 34609 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 regi stered agent. SIGNATÚRE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Addition TITLE ☐ Delete TITLE Change 8253 NIELROSE RU MOULTON, KELLY NAME NAME STREET ADDRESS 2238 DANFORTHRD STREET ADDRESS MELrOSE PLBALL SPRINGHILL, FL 34608 CUTY-ST-7IP CITY-ST-ZIP Detete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Change TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiveryor 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.

**FILED**