2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 12, 2005
Secretary of State

DOCUMENT# P04000077825

Entity Name: A-1 DOOR SYSTEMS, INC.

Current Principal Place of Business:

512 BURNING EMBERS LANE
JACKSONVILLE, FL 32225 US

New Principal Place of Business:

Current Mailing Address:

512 BURNING EMBERS LANE
JACKSONVILLE, FL 32225 US

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STRONG, RONALD L
16 SEMINOLE ROAD
ATLANTIC BEACH, FL 32233 US

Name and Address of New Registered Agent:

ECKESS, DAVE
512 BURNING EMBERS LANE
JACKSONVILLE, FL 32225 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: DAVE ECKESS 07/12/2005
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ECKESS, DAVE
Address: 512 BURNING EMBERS LANE
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: VP (X) Delete
Name: STANFORD, DOUG
Address: 3809 LAVISTA CIRCLE
City-St-Zip: JACKSONVILLE, FL 32217 US

Title: T, D (X) Delete
Name: DAVE ECKES,
Address: 512 BURNING EMBERS LANE
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: S, D (X) Delete
Name: DOUG STANFORD,
Address: 3809 LAVISTA CIRCLE
City-St-Zip: JACKSONVILLE, FL 32217 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVE ECKESS P 07/12/2005
Electronic Signature of Signing Officer or Director Date