2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000088942

Entity Name: FALCON SOFFIT & SIDING CORP

FILED Feb 20, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

VΡ

Current Principal Place of Business: New Principal Place of Business:

6376 RALEIGH STREET 5340 MILLENIA BLVD **SUITE 2015** SUITE 12412 ORLANDO, FL 32835 ORLANDO, FL 32839

New Mailing Address: **Current Mailing Address:**

6376 RALEIGH STREET 5340 MILLENIA BLVD **SUITE 12412 SUITE 2015** ORLANDO, FL 32835 ORLANDO, FL 32839

FEI Number: 20-5147212 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MATZENBACHER, MAURI J MATZENBACHER, MAURI J 5340 MILLENIA BLVD 6376 RALEIGH STREET **SUITE 2015** SUITE 12412 ORLANDO, FL 32839 US ORLANDO, FL 32835 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: MAURI J MATZENBACHER 02/20/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

VΡ

Title: () Delete Title: (X) Change () Addition MATZENBACHER, MAURI J MATZENBACHER, MAURI J Name: Name: 6376 RALEIGH STREET 5340 MILLENIA BLVD SUITE 12412 Address: Address:

City-St-Zip: ORLANDO, FL 32835 City-St-Zip: ORLANDO, FL 32839

Title: Title: (X) Change () Addition () Delete BITTENCOURT, DULCE C BITTENCOURT, DULCE C Name: Name: 6376 RALEIGH STREET 5340 MILLENIA BLVD SUITE 12412 Address: Address:

ORLANDO, FL 32835 ORLANDO, FL 32839 City-St-Zip: City-St-Zip:

() Delete Title: Title: DIR () Change (X) Addition

Name: DOS SANTOS, CASIO N Name: 5340 MILLENIA BLVD SUITE 12412 Address Address:

City-St-Zip: City-St-Zip: ORLANDO, FL 32839

I hereby certify that the information supplied with this filing does not qualify 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: MAURI J MATZENBACHER PD 02/20/2009