

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000115539

FILED
Apr 14, 2009
Secretary of State

Entity Name: EXTREME IMPACT SHUTTER SUPPLY, INC.

Current Principal Place of Business:

6855 WOODMERE ROAD
SEBASTIAN, FL 32958

New Principal Place of Business:

Current Mailing Address:

PO BOX 781510
SEBASTIAN, FL 329781510

New Mailing Address:

FEI Number: 51-0608996

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANDFORD, CHARLES
3003 CARDINAL DRIVE
SUITE B
VERO BEACH, FL 32963 US

Name and Address of New Registered Agent:

SCHROEDER, WILLIAM W
6855 WOODMERE ROAD
SEBASTIAN, FL 32958 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: WILLIAM WAYNE SCHROEDER

04/14/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCHROEDER, WILLIAM W
Address: 500 SUNDANCE TRAIL
City-St-Zip: VERO BEACH, FL 32963

Title: V (X) Delete
Name: RUBIN, JAY J
Address: 6690 SW 18TH TERR RD
City-St-Zip: OCALA, FL 34476

Title: S/T (X) Delete
Name: MOORE, ROBERT L
Address: 13855 95TH STREET
City-St-Zip: FELLSMERE, FL 32948

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:

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: WILLIAM WAYNE SCHROEDER

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04/14/2009

Electronic Signature of Signing Officer or Director

Date