

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F61397

**Entity Name:** LLOYD'S ALUMINUM & WINDOW SERVICE, INC.

**Current Principal Place of Business:**

6190 SEMINOLE BLVD.  
SEMINOLE, FL 33772

**Current Mailing Address:**

6190 SEMINOLE BLVD.  
SEMINOLE, FL 33772

**FEI Number:** 59-2149202

**Certificate of Status Desired:** Yes

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

DAVIS, JAMES FPST  
6190 SEMINOLE BLVD.  
SEMINOLE, FL 33772 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PST  
Name DAVIS, JAMES FPRES  
Address 6190 SEMINOLE BLVD.  
City-State-Zip: SEMINOLE FL 33772

*I hereby 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 all other like empowered.*

**SIGNATURE:** JAMES F. DAVIS

**PRESIDENT**

**01/17/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date