2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 182054

Entity Name: FLORIDA MADE DOOR CO.

FILED Jan 17, 2011 Secretary of State

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

ONE NORTH DALE MABRY HWY ONE TAMPA CITY CENTER 201 N. FRANKLIN ST

SUITE 950 SUITE 300

TAMPA, FL 33609 US TAMPA, FL 33602 US

Current Mailing Address: New Mailing Address:

ONE NORTH DALE MABRY HWY ONE TAMPA CITY CENTER 201 N. FRANKLIN ST

SUITE 950 SUITE 300 TAMPA, FL 33609 US

TAMPA, FL 33602 US

FEI Number: 59-0737960 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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

OFFICERS AND DIRECTORS:

Title:

LYNCH, FREDERICK J Name:

ONE TAMPA CITY CENTER 201 N. FRANKLIN ST Address:

City-St-Zip: SUITE 300, TAMPA, FL 33602 US

Title: VΡ

Name: REPAR, LAWRENCE

ONE TAMPA CITY CENTER 201 N. FRANKLIN ST Address:

SUITE 300, TAMPA, FL 33602 US City-St-Zip:

Title: AS

HEWLETT, TREVOR A Name:

ONE TAMPA CITY CENTER 201 N. FRANKLIN STRE Address:

City-St-Zip: SUITE 300, TAMPA, FL 33602 US

Title: AS

MURPHY, ROSE M Name:

Address: ONE TAMPA CITY CENTER 201 N. FRANKLIN ST

City-St-Zip: SUITE 300, TAMPA, FL 33602 US

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: TREVOR HEWLETT AS 01/17/2011