


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 03, 2008 08:00 A
Secretary of State

DOCUMENT # 674250 1. Entity Name CENTRAL WINDOW OF VERO BEACH, INC.	
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Principal Place of Business 4388 U.S. HWY. 1 VERO BCH, FL 32967	Mailing Address 4388 U.S. HWY. 1 VERO BCH, FL 32967
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DO NOT WRITE IN THIS SPACE



02182008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2013372	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent LABADIE, LAWRENCE G. 3586 MARSHA LN VERO BEACH, FL 32967	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S LABADIE, MAUREEN A 3586 MARSHA LANE VERO BEACH, FL 32967
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P LABADIE, LAWRENCE G 3586 MARSHA LANE VERO BEACH, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V LABADIE, JOSEPH L 4176 79TH STREET VERO BEACH, FL 32967
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T HENDERSON, TAMMY M 955 47TH AVENUE SW VERO BEACH, FL 32968
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WARD, DAVID L 315 CATHEDRAL OAKS DR VERO BCH, FL 32963
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

U00000845830
03/18/08-80006-005 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Lawrence G. Labadie* **LAWRENCE G. LABADIE** 2/26/08 772-520-816
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #