


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 01, 2006 8:00 am**  
**Secretary of State**

05-01-2006 90297 041 \*\*\*150.00

<b>DOCUMENT # 821769</b> 1. Entity Name <b>EXTERIOR SYSTEMS, INC.</b>					
Principal Place of Business <b>ONE OWENS CORNING PARKWAY TOLEDO, OH 43659</b>			Mailing Address <b>ONE OWENS CORNING PARKWAY TAX 3-G TOLEDO, OH 43659</b>		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		04142006 Chg-P CR2E034 (11/05)	
4. FEI Number <b>54-0790261</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>THAMAN, MICHAEL</b> <b>ONE OWENS CORNING WAY</b> <b>TOLEDO, OH 43659</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>COOK, WILLIAM K</b> <b>ONE OWENS CORNING WAY</b> <b>TOLEDO, OH 43659</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Treasurer</b> <b>Robert R. Krakowiak</b> <b>One Owens Corning Pkwy</b> <b>Toledo, OH 43657</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>WILKE, JEFFREY S</b> <b>ONE OWENS CORNING WAY</b> <b>TOLEDO, OH 43659</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>DIETZEL, DANIEL J</b> <b>ONE OWENS CORNING WAY</b> <b>TOLEDO, OH 43659</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>President</b> <b>Brian Chambers</b> <b>One Owens Corning Pkwy</b> <b>Toledo, OH 43657</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VD</b> <b>THAN, RALPH A</b> <b>ONE OWENS CORNING WAY</b> <b>TOLEDO, OH 43659</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>MIKELONIS, JOSEPH J</b> <b>ONE OWENS CORNING PKWY</b> <b>TOLEDO, OH 43659</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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: <i>(Signature)</i> <b>Joseph J. Mikelonis</b> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			<b>04/17/06</b> <b>(419) 248-6996</b> Date Daytime Phone #		

ATTACHMENT

40070560  
#821769



## Exterior Systems, Inc.

### INFORMATION LAST REVISED:

10/12/2005

### OWNERSHIP:

100% -- Fibreboard Corporation

### PURPOSE:

Exterior Systems, Inc. resulted from the December 31, 1999 merger of Fabwel, Inc., AmeriMark Building Products, Inc., into Norandex Inc. and Norandex Inc. into Exterior Systems

### ADDRESS:

c/o Owens Corning, One Owens Corning Parkway  
Toledo  
OH 43659  
USA

### DIRECTORS:

Michael H. Thaman, Director  
Ralph A. Than, Director  
Joseph J. Mikelonis, Director

### OFFICERS:

Brian Chambers, President  
Ralph A. Than, Vice President  
Joseph J. Mikelonis, Vice President  
Van Garber, Vice President  
Robert R. Krakowiak, Treasurer  
Thomas Winston, Assistant Treasurer  
Jeffrey S. Wilke, Secretary  
Rodney A. Nowland, Assistant Secretary  
Chuck Jerasa, Vice President, General Manager, Fabwel Division  
Lynn Kovalcheck, Assistant Secretary and Controller, Norandex Reynolds

### INCORPORATED:

5/24/65 (Delaware)

