

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000001881

Entity Name: VELUX SOLUTIONS INC.

FILED
Jan 13, 2009
Secretary of State

Current Principal Place of Business:

1418 EVANS POND ROAD
GREENWOOD, SC 29649

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5001
GREENWOOD, SC 296485001

New Mailing Address:

FEI Number: 57-1119601

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTC D () Delete
Name: TANG-JENSEN, JERGEN
Address: ADALSVJEJ 99
City-St-Zip: 2970 HORSHOLM, DENMARK,

Title: D () Delete
Name: HAGY, M. DEXTER
Address: 109 LAURENS ROAD, SUITE 1-D
City-St-Zip: GREENVILLE, SC 29607

Title: VCFO () Delete
Name: HORVATH, WILLIAM F.
Address: 450 OLD BRICKYARD RD., PO BIX 5001
City-St-Zip: GREENWOOD, SC 29648

Title: VCFO () Delete
Name: HORVATH, WILLIAM F
Address: 450 OLD BRICKYARD ROAD
City-St-Zip: GREENWOOD, SC 29648

Title: S () Delete
Name: BENJAMIN, WILLIAM C
Address: 60 STATE STREET
City-St-Zip: BOSTON, MA 02109

Title: AS () Delete
Name: PATRICK, WILLIAM B JR.
Address: DEADFALL ROAD
City-St-Zip: GREENWOOD, SC 29649

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:

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 F HORVATH

CFO

01/13/2009

Electronic Signature of Signing Officer or Director

Date