## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F03000002153

Entity Name: SIMONTON WINDOW, INC.

FILED Apr 24, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
5300 BRISCOE ROAD PARKERSBURG, WV 26102					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
PO BOX 1646 PARKERSBURG, WV 26102					
FEI Number:	75-3107574	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
HAMB, WILLIAM E 6444 BEACH WOOD ROAD AMELIA ISLAND, FL 32034 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  Election Campaign Financing Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:					
Title: Name: Address: City-St-Zip:	CD ( ROSS, SAM 4600 RIVER R VIENNA, WV 2		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( ROSS, SAM 4600 RIVER R VIENNA, WV 2		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	P ( KEUP, RICK 4202 RIVER R VIENNA, WV 2		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP ( SCHORR, GRE 800 54TH STR VIENNA, WV 2	EET	Title: Name: Address: City-St-Zip:	( ) Change() Addition	
Title: Name: Address: City-St-Zip:	S ( SMITH, DONNA 10 FOXBORO VIENNA, WV 2	DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T ( STANDLEY, BI 4 CHADWICK S VIENNA, WV 2	SQUARE	Title: Name: Address: City-St-Zip:	() Change () Addition	
I hereby certify that the information supplied with this filing does not qualify for the 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					

Electronic Signature of Signing Officer or Director

above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONNA M SMITH

Date

04/24/2006

SEC