


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**


FILED
Apr 16, 2008 08:00 A
Secretary of State

DOCUMENT # F04000005979
1. Entity Name
AA EXTERIOR REMODELING & AWNING INC.



Principal Place of Business 762 OAK ST. FORT MYERS BEACH, FL 33931	Mailing Address PO BOX 2688 FORT MYERS BEACH, FL 33932
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DO NOT WRITE IN THIS SPACE



04082008 No Chg-P CR2E034 (11/05)

4. FEI Number 34-1157412	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

MOORE, ALBERT LEE
1711 MAIN STREET G-5
FORT MYERS BEACH, FL 33931

DO NOT WRITE IN THIS SPACE

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 _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

000000900087
04/29/08-80015-002 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST MOORE, ALBERT LEE 1711 MAIN STREET G-5 FORT MYERS BEACH, FL 33931
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CVCD MOORE, ALBERT LEE 1711 MAIN STREET G-5 FORT MYERS BEACH, FL 33931
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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: *Albert L. Moore* Albert L. Moore *April 14th 2008*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date: Daytime Phone: #