

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002899

FILED  
Mar 27, 2011  
Secretary of State

**Entity Name:** THRUWAYS DOORSYSTEMS, INC.

**Current Principal Place of Business:**

2651 TARPON ROAD  
NAPLES, FL 34102

**New Principal Place of Business:**

2651 TARPON ROAD  
NAPLES, FL 34102 US

**Current Mailing Address:**

2651 TARPON ROAD  
NAPLES, FL 34102

**New Mailing Address:**

2651 TARPON RD  
NAPLES, FL 34102 US

**FEI Number:** 25-1650695

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LICHY, DALE M  
2651 TARPON ROAD  
NAPLES, FL 34102 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

**OFFICERS AND DIRECTORS:**

Title: PC  
Name: LICHY, DALE M  
Address: 2651 TARPON ROAD  
City-St-Zip: NAPLES, FL 34102 US

Title: VST  
Name: LICHY, BARBARA J  
Address: 2651 TARPON ROAD  
City-St-Zip: NAPLES, FL 34102 US

Title: VC  
Name: LICHY, BARBARA J  
Address: 2651 TARPON ROAD  
City-St-Zip: NAPLES, FL 34102 US

I hereby 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 all other like empowered.

SIGNATURE: DALE M LICHY

MR.

03/27/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date