

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 17, 2006 8:00 am**  
**Secretary of State**

02-17-2006 90077 048 \*\*\*150.00

**DOCUMENT # F78115**

1. Entity Name  
**GARAGE DOORS BY ROY NORTH, INC.**



Principal Place of Business  
**2085 ANDREA LANE  
FT. MYERS, FL 33912 US**

Mailing Address  
**2085 ANDREA LN  
FT. MYERS, FL 33912 US**

**60018127**



02062006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

|   |  |
|---|--|
| 4. FEI Number<br><b>59-2069160</b>                        | Applied For<br><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**

**NORTH, DAVID  
2085 ANDREA LANE  
FT. MYERS, FL 33912**

**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 *David North*  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**2-6-06**

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS**

|  |  |
|--|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | S<br>MOORE, CONNIE<br>17505 DUQUESNE LN<br>FT MYERS, FL 33912                    |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | P<br>NORTH, DAVID<br>8295 WREN RD<br>FT MYERS, FL 33912                          |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | VP<br>BUTZIN, BRENT<br>1069 JOPONKA AVE S<br>LEHIGH ACRES, FL 33936              |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | VO<br>NORTH, DARRIN<br>9123 ESTERO RIVER CIR<br>ESTERO, FL 33928                 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | T<br>DUBY, CAROL<br>18319 HAWTHORN RD<br>FT MYERS, FL 33912                      |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | V<br>NORTH, DARREL<br>47520 BRADDOCK RD 17248 Trellis Road<br>FT MYERS, FL 33912 |

**DO NOT WRITE  
IN THIS SPACE**

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: *Connie Moore* **Connie Moore** **2-6-06** **239-482-5211**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #