## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F95000005675

Entity Name: WINDOW SUPPLY, INC.

FILED Jan 15, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

4441 SE 53 AVE OCALA, FL 344807405 US

**Current Mailing Address: New Mailing Address:** 

PO BOX 830157 OCALA, FL 344830157 US

FEI Number: 58-2154515 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:

MCKINNEY, GERALD W 89 N.E. 56TH TERR. OCALA, FL 34470

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:

Date

Electronic Signature of Registered Agent

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition

MCKINNEY, GERALD MCKINNEY, GERALD Name: Name: 2631 NE 49 COURT 89 NE 56TH TERRACE Address: Address:

City-St-Zip: OCALA, FL City-St-Zip: OCALA, FL 34470

Title: Title: (X) Change ( ) Addition () Delete

NEWPORT, RENEE NEWPORT, RENEE Name: Name: 4607 SE 15TH STREET Address: 625 SE 52ND COURT Address: OCALA, FL 34471 OCALA, FL 34471 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RENEE NEWPORT S 01/15/2004