2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H85644

Entity Name: WINDOW DESIGNS, INC.

FILED Jan 30, 2006 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

2419 ORMSBY CIRCLE EAST 9381 COXWELL LN.

JACKSONVILLE, FL 32210 JACKSONVILLE, FL 32221

Current Mailing Address: New Mailing Address:

2419 ORMSBY CIRCLE EAST 9381 COXWELL LN.

JACKSONVILLE, FL 32210 JACKSONVILLE, FL 32221

FEI Number: 59-2603979 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:

PARRISH, FRANK EDWARD, JR.

2419 ORMSBY CIRCLE EAST

JACKSONVILLE, FL 32210 US

PARRISH, FRANK EDWARD, JR.

9381 COXWELL LN.

JACKSONVILLE, FL 32221 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: 01/30/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: PARRISH, FRANK EDWAR, D JR Name: PARRISH, FRANK EDWAR, D JR

Address: 2419 ORMSBY CIRCLE EAST Address: 9381 COXWELL LN

City-St-Zip: JACKSONVILLE, FL 32210 US City-St-Zip: JACKSONVILLE, FL 32221 US

Title: ST () Delete Title: ST (X) Change () Addition Name: PARRISH, VIVIAN FAY, Name: PARRISH, VIVIAN FAY,

Address: 2419 ORMSBY CIRCLE EAST Address: 9381 COXWELL LN.
City-St-Zip: JACKSONVILLE, FL 32210 US City-St-Zip: JACKSONVILLE, FL 32221 US

 Title:
 VP
 () Delete
 Title:
 () Change () Addition

 Name:
 PATTON, DEVON K.,
 Name:

 Address:
 7777 PINNACLE DR.
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32221
 City-St-Zip:

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

SIGNATURE: FRANK EDWARD PARRISH JR. P 01/30/2006