2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K56212

FILED Apr 29, 2009 Secretary of State

Entity Name: MASTERKRAFT SCREEN AND ALUMINUM, INC.

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

6571 43RD ST N UNIT 1711 6571 43RD ST N UNIT 1711

PINELLAS PARK, FL 346652951 PINELLAS PARK, FL 337810910 US

Current Mailing Address: New Mailing Address:

6571 43RD ST N UNIT 1711 6571 43RD ST N UNIT 1711

PINELLAS PARK, FL 346652951 PINELLAS PARK, FL 337810910 US

FEI Number: 59-2929159 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:

MOORE, BRUCE DANA
5236 88TH TERR N

MOORE, BRUCE DANA
6061 64TH AV. N.

PINELLAS PARK, FL 33782 US PINELLAS PARK, FL 33781 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: BRUCE D. MOORE 04/29/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: MOORE, BRUCE D Name: MOORE, BRUCE D

 Address:
 5236 88 TERR N
 Address:
 6061 64TH. AV. N.

 City-St-Zip:
 PINELLAS PARK, FL 33782
 City-St-Zip:
 PINELLAS PARK, FL 33781

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

 Name:
 MOORE, RAYMOND
 Name:
 MOORE, RAYMOND A

 Address:
 227 N GROSSE AVE.
 Address:
 227 N GROSSE AVE.

 City-St-Zip:
 TARPON SPRINGS, FL 34689
 City-St-Zip:
 TARPON SPRINGS, FL 34689

I hereby certify that the information supplied with this filing does not qualify 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: BRUCE D. MOORE PD 04/29/2009