2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000043814

Entity Name: F&G SOFFIT AND SIDING LLC

FILED Feb 11, 2008 Secretary of State

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

839 BROOKSON AVE. 652 SEVEN GABLES CIR. SE

PALM BAY, FL 32907 PALM BAY, FL 32909

Current Mailing Address: New Mailing Address:

839 BROOKSON AVE. 652 SEVEN GABLES CIR. SE

PALM BAY, FL 32907 PALM BAY, FL 32909

FEI Number: 54-2133314 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:

FRAME, KRISTIEN C FRAME, KRISTIEN C 652 SEVEN GABLES CIR. SE

839 BROOKSON AVE. 652 SEVEN GABLES CIR. SE PALM BAY, FL 32907 US PALM BAY, FL 32909 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: KRISTIEN C. FRAME 02/11/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: FRAME, KRISTIEN C Name: FRAME, KRISTIEN C

 Address:
 839 BROOKSON AVE.
 Address:
 652 SEVEN GABLES CIR. SE

 City-St-Zip:
 PALM BAY, FL 32907
 City-St-Zip:
 PALM BAY, FL 32909

Title: MGRM () Delete Title: () Change () Addition

 Name:
 GRAHAM, WILLIAM
 Name:

 Address:
 652 SEVEN GABLES CIR SE
 Address:

 City-St-Zip:
 PALM BAY, FL 32909
 City-St-Zip:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: KRISTIEN C. FRAME MGRM 02/11/2008