

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000052846

FILED
May 01, 2004
Secretary of State

Entity Name: TROPICAL WINDOWS AND DOORS, LLC

Current Principal Place of Business:

614 RENAISSANCE POINT
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

614 RENAISSANCE POINT
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FRANKLIN, DESMOND
614 RENAISSANCE POINT
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: FRANKLIN, DESMOND
Address: 614 RENAISSANCE POINT
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: MGR () Delete
Name: LARONDE, MICHAEL
Address: 206 DERBY DOWNS PLACE , #101
City-St-Zip: BRANDON, FL 33510

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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 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: DESMOND FRANKLIN MGR 05/01/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date