

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000004959

FILED
Jan 25, 2009
Secretary of State

Entity Name: ACCURATE WINDOW & SCREEN, LLC

Current Principal Place of Business:

5700 N. NEBRASKA AVE.
TAMPA, FL 33604

New Principal Place of Business:

Current Mailing Address:

5700 N. NEBRASKA AVE.
TAMPA, FL 33604

New Mailing Address:

FEI Number: 59-3440910 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HINES, KERMIT J
5700 N. NEBRASKA AVE.
TAMPA, FL 33604 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/MANAGERS:

Title: MGR () Delete
Name: HINES, KERMIT J
Address: 1216 E JEAN ST
City-St-Zip: TAMPA, FL 33604

Title: MGR () Delete
Name: HINES, CHRIS
Address: 5100 N NEBRASKA AVE
City-St-Zip: TAMPA, FL 33604

Title: MGR () Delete
Name: HINES, LANA
Address: 1216 E JEAN ST
City-St-Zip: TAMPA, FL 33604

ADDITIONS/CHANGES:

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

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 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: KERMIT HINES

PRES

01/25/2009

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