


2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT

FILED
Jul 18, 2005 8:00 am
Secretary of State

07-18-2005 90108 009 ****55.00

DOCUMENT # L04000012456	
1. Entity Name ANGELO'S VINYL SIDING COMPANY L.L.C.	

Principal Place of Business 155 DEER RUN S. DEFUNIAK SPRINGS, FL 32435	Mailing Address 155 DEER RUN S. DEFUNIAK SPRINGS, FL 32435
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2. Principal Place of Business Same	3. Mailing Address Same
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State Same	City & State Same
Zip Same	Country Walton



07032005 Chg-LLC CR2E083 (10/03)

6. Name and Address of Current Registered Agent WHITMAN, ANGELO 155 DEER RUN S. DEFUNIAK SPRINGS, FL 32435	
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4. FEI Number 87-0720677	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$50.00 Due by September 7, 2005	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WHITMAN, ANGELO 155 DEER RUN S. DEFUNIAK SPRINGS, FL 32435 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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11. I hereby certify that the information supplied with this filing does not qualify 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 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: Angelo Whitman 7-13-05 (850) 585-4715
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #