

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000048611

FILED
Apr 30, 2008
Secretary of State

Entity Name: FAS WINDOWS AND DOORS OF TAMPA, LLC

Current Principal Place of Business:

7703 ANDERSON RD.
TAMPA, FL 33634

New Principal Place of Business:

Current Mailing Address:

4210 L B MCLEOD ROAD SUITE 101
ORLANDO, FL 32811

New Mailing Address:

FEI Number: 20-4868628

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAYROBINSON, P.A.
301 EAST PINE STREET, SUITE 1400
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

CONTRACT REVIEW SERVICES, LLC
174 W. COMSTOCK AVENUE, SUITE 103
ORLANDO, FL 32789 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: NORA H. MILLER, ESQ.

04/30/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WILDING, ERNEST
Address: 1250 N. PARK AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: MGR () Delete
Name: WILDING, JOHN
Address: 2221 KING CHARLES CT.
City-St-Zip: WINTER PARK, FL 32792

ADDITIONS/CHANGES:

Title: CS (X) Change () Addition
Name: WILDING, ERNEST
Address: 1250 N. PARK AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: MGRP (X) Change () Addition
Name: WILDING, JOHN
Address: 2221 KING CHARLES CT.
City-St-Zip: WINTER PARK, FL 32792

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: JOHN S. WILDING

MR.

04/30/2008

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