

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Mar 09, 2005 08:00 AM
Secretary of State

DOCUMENT # L08404

1. Entity Name
D D S DOOR SYSTEMS, INC.



Principal Place of Business
**933 MISSION HILL ROAD
BOYNTON BEACH, FL 33435 US**

Mailing Address
**933 MISSION HILL ROAD
BOYNTON BEACH, FL 33435 US**



01042005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0138316	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**GERHARDT, DAVID
933 MISSION HILL ROAD
BOYNTON BEACH, FL 33435**

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GERHARDT, DAVID 933 MISSION HILL ROAD BOYNTON BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVD DARNELL, DIANE 933 MISSION HILL ROAD BOYNTON BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FD MCDONALD, SEAN 4765 NE 16TH AVE FT LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

UD00000256898
03/09/05-80032-015 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Diane L. Darnell, Vice President

SIGNATURE: *Diane L. Darnell*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/07/05

561-736-3311

Date

Daytime Phone #