

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L48302

FILED
Mar 11, 2009
Secretary of State

Entity Name: ARCHITECTURAL SPECIALTIES TRADING CO.

Current Principal Place of Business:

310 HICKORY ST
PENSACOLA, FL 32505 US

New Principal Place of Business:

Current Mailing Address:

310 HICKORY ST
PENSACOLA, FL 32505 US

New Mailing Address:

FEI Number: 59-2986941 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BEGGS & LANE, RLLP
501 COMMENDENCIA STREET
PENSACOLA, FL 32502 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDT () Delete
Name: FLOURNOY, JAMES E
Address: 310 HICKORY STREET
City-St-Zip: PENSACOLA, FL 32505

Title: VSD () Delete
Name: FONTENOT, WILLIAM S
Address: 100 AVENIDA 23
City-St-Zip: PENSACOLA BCH., FL 32561

Title: DC () Delete
Name: TAGGART, JEFFREY S
Address: 310 HICKORY ST
City-St-Zip: PENSACOLA, FL 32505 US

Title: DP () Delete
Name: STEVENS, THOMAS J
Address: 4878 N. MAGNOLIA AVENUE
City-St-Zip: CHICAGO, IL 60640

Title: DV (X) Delete
Name: STEVENS, MATTHEW S
Address: 4878 N. MAGNOLIA AVENUE
City-St-Zip: CHICAGO, IL 60640

Title: DST (X) Delete
Name: HOWARD, EDNA
Address: 4878 N. MAGNOLIA AVENUE
City-St-Zip: CHICAGO, IL 60640

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: STEVENS, THOMAS J
Address: 851 GINNISON
City-St-Zip: CHICAGO, IL 60640

Title: VD (X) Change () Addition
Name: STEVENS, MATTHEW S
Address: 4878 N MAGNOLIA
City-St-Zip: CHICAGO, IL 60640

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

Title: DST (X) Change () Addition
Name: HOWARD, EDNA
Address: 5401 HOWARD
City-St-Zip: WESTERN SPRINGS, IL 60558

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEFF TAGGART

CEO

03/11/2009

Electronic Signature of Signing Officer or Director

_____ Date