

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L70890

Entity Name: PLY-TRIM WEST, INC.

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2920 S CUSHMAN  
TACOMA, WA 98409 US

**New Principal Place of Business:**

**Current Mailing Address:**

7733 MARKHAM BEND PLACE  
SANFORD, FL 32771 US

**New Mailing Address:**

FEI Number: 65-0198481

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HOFFMAN, KATHLEEN A.  
7733 MARKHAM BEND PLACE  
SANFORD, FL 32771 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

**OFFICERS AND DIRECTORS:**

Title: COB  
Name: HOFFMAN, HARRY O.  
Address: 7733 MARKHAM BEND PLACE  
City-St-Zip: SANFORD, FL 32771

Title: VP  
Name: HOFFMAN, KATHLEEN A.  
Address: 7733 MARKHAM BEND PALCE  
City-St-Zip: SANFORD, FL 32771

I hereby 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 all other like empowered.

SIGNATURE: HARRY O. HOFFMAN

COB

02/16/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date