2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000039118

ANGELL, DAVID VP

VENICE, FL 34292 US

150 POND CYPRESS ROAD

Name:

Address:

City-St-Zip:

Entity Name: DOOR DEPOT OF SOUTHWEST FLORIDA, INC.

FILED Mar 21, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
150 PONE VENICE, F	CYPRESS F FL 34292	ROAD			
Current Mailing Address:			New Mailing Address:		
150 PONE VENICE, F	CYPRESS F FL 34292	ROAD			
FEI Number	: 65-1000520	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	d Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:	
	NE, JAMES A CYPRESS F FL 34292 U	ROAD JS			
	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Ca	mpaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	BUONPANE,) Delete IAMES A DIRECTO (PRESS ROAD 84292 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CESSNA, D S	PRESS ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	YOUNG, JAMI	PRESS ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	VP () Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JAMES BUONPANE PRES 03/21/2009