2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Oct 08, 2007
Secretary of State

DOCUMENT# P00000083065

Entity Name: PALM COAST SHUTTERS & ALUMINUM PRODUCTS, INC.

Current Principal Place of Business:

675 4TH STREET
VERO BEACH, FL 32962

New Principal Place of Business:

Current Mailing Address:

3755 7TH TERR.
SUITE 101
VERO BEACH, FL 32960

New Mailing Address:

FEI Number: 65-1049372 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HUDSON, DOROTHY A
3755 7TH TERRACE
SUITE 101
VERO BEACH, FL 32960 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: PD ( ) Delete
Name: MCNALLY, ROBERT C
Address: 522 BAY DRIVE
City-St-Zip: VERO BEACH, FL 32963

Title: STD ( ) Delete
Name: MCNALLY, JACQUELINE P
Address: 522 BAY DRIVE
City-St-Zip: VERO BEACH, FL 32963

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change ( ) Addition
Name: MCNALLY, JACQUELINE P
Address: 522 BAY DRIVE
City-St-Zip: VERO BEACH, FL 32963

Title: SD ( ) Change (X) Addition
Name: ALAIMO, LOUIS
Address: P.O. BOX 982
City-St-Zip: VERO BEACH, FL 32961

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: ROBERT C. MCNALLY PD 10/08/2007

Electronic Signature of Signing Officer or Director — Date