2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P00000117676

1. Entity Name
CERTIFIED WINDOWS & DOORS, INC.

FILED
05 MAY 17 AM 9:35
SECRETARY OF STATE

Principal Place of Business	Mailing Address
312 SW 13TH AVE POMPANO BEACH, FL 33069	2279 NW 75 AVE MARGATE, FL 33063

05132005 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-1064530 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HERMAN, BRUCE 2279 NW 75TH AVENUE MARGATE, FL 33063	Name: Kelderhouse, L. James Street Address (P.O. Box Number is Not Acceptable): 2279 NW 75th Avenue City: Margate FL Zip Code: 33063

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] L. James Kelderhouse May 12, 2005
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Amended AR is $61.25

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

10. OFFICERS AND DIRECTORS		
TITLE	P	☐ Delete
NAME	KELDERHOUSE, L. JAMES	
STREET ADDRESS	2279 NW 75 AVENUE	
CITY-ST-ZIP	MARGATE, FL 33063	
TITLE	V	☐ Delete
NAME	KELDERHOUSE, SUZANNE J	
STREET ADDRESS	2279 NW 75 AVENUE	
CITY-ST-ZIP	MARGATE, FL 33063	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	S	☐ Change ☒ Addition
NAME	Adams, Dawn M.	
STREET ADDRESS	7658 NW 21st Street	
CITY-ST-ZIP	Margate, FL 33063	
TITLE	900055375939	☐ Change ☐ Addition
NAME	05/26/05--01052--005 **70.00	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: [signature] L. James Kelderhouse May 12, 2005 954-781-1260
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #