



**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 16, 2007 08:00 AM
Secretary of State

DOCUMENT # P01000000157		
1. Entity Name SUNCOAST GARAGE DOORS & OPERATOR CO., INC.		
Principal Place of Business 7910 N FAIRPORT AVE DUNNELLON, FL 34433		Mailing Address 7910 N FAIRPORT AVE DUNNELLON, FL 34433
DO NOT WRITE IN THIS SPACE		
		02102007 No Chg-P CR2E034 (11/05)
4. FEI Number 59-1200154		Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent WILCHYNSKI, JOHN 7910 N FAIRPORT AVE DUNNELLON, FL 34433		DO NOT WRITE IN THIS SPACE
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD WILCHYNSKI, JOHN 7910 N FAIRPORT AVE DUNNELLON, FL 34433	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	STD WILCHYNSKI, ROSANNA 7910 N FAIRPORT AVE DUNNELLON, FL 34433	
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DO NOT WRITE IN THIS SPACE		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: 		JOHN WILCHYNSKI
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small> _____ <small>Daytime Phone #</small> _____