

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000029919

FILED
Jun 16, 2009
Secretary of State

Entity Name: ACTION REPLACEMENT WINDOWS, INC.

Current Principal Place of Business:

1748 MAPLE AVE.
FT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

1748 MAPLE AVE
FT MYERS, FL 33901

New Mailing Address:

1748 MAPLE
FORT MYERS, FL 33901

FEI Number: 65-1103381

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BESHEARS, MICHAEL
1748 MAPLE AVE
FT MYERS, FL 33901 US

Name and Address of New Registered Agent:

BESHEARS, MICHAEL
1748 MAPLE
FORT MYERS, FL 33901 US

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

06/16/2009

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BESHEARS, MICHAEL
Address: 1748 MAPLE AVE
City-St-Zip: FT MYERS, FL 33901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: MICHAEL BESHEARS

MR.

06/16/2009

Electronic Signature of Signing Officer or Director

Date