

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000054342

FILED
Mar 21, 2007
Secretary of State

Entity Name: TOTAL COMFORT WINDOW AND SCREENING, INC.

Current Principal Place of Business:

2244 SOUTH TAMIAMI TRAIL
VENICE, FL 34293

New Principal Place of Business:

Current Mailing Address:

2244 SOUTH TAMIAMI TRAIL
VENICE, FL 34293

New Mailing Address:

FEI Number: 65-1108807 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VANEK, DAVID
2244 SOUTH TAMIAMI TRAIL
VENICE, FL 34293 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VANEK, DAVID
Address: 4445 AVANTI CIRCLE
City-St-Zip: NORTH PORT, FL 34287

Title: VP () Delete
Name: VANEK, AUDREY
Address: 4445 AVANTI CIRCLE
City-St-Zip: NORTH PORT, FL 34287

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: VANEK, DAVID
Address: 4445 AVANTI CIRCLE
City-St-Zip: NORTH PORT, FL 34287 US

Title: VP (X) Change () Addition
Name: VANEK, AUDREY
Address: 4445 AVANTI CIRCLE
City-St-Zip: NORTH PORT, FL 34287 US

Title: SEC () Change (X) Addition
Name: CHASE, MAXWELL
Address: 4325 AVANTI CIRCLE
City-St-Zip: NORTH PORT, FL 34287 US

I hereby certify that the information supplied with this filing does not qualify for the 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: AUDREY VANEK

VP

03/21/2007

Electronic Signature of Signing Officer or Director

_____ Date