

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000054342

FILED  
Jan 04, 2008  
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 ( )**

**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 US

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

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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:** AUDREY VANEK

VP

01/04/2008

Electronic Signature of Signing Officer or Director

Date