

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000063035

FILED
Jan 04, 2008
Secretary of State

Entity Name: PURE VINYL FENCE SYSTEMS INC.

Current Principal Place of Business:

4314 ST. AUGUSTINE RD
SUITE 5
JACKSONVILLE, FL 32207

New Principal Place of Business:

4314 ST. AUGUSTINE RD
JACKSONVILLE, FL 32207

Current Mailing Address:

4314 ST. AUGUSTINE RD
SUITE 5
JACKSONVILLE, FL 32207

New Mailing Address:

P O BOX 10534
JACKSONVILLE, FL 32247

FEI Number: 59-3725734

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DRYDEN, SHERRY
481 ADDOR LANE
JACKSONVILLE, FL 32220 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: DRYDEN, SHERRY
Address: 481 ADDOR LN
City-St-Zip: JACKSONVILLE, FL 32220

Title: V () Delete
Name: DRYDEN, MICHAEL SR
Address: 481 ADDOR LN
City-St-Zip: JACKSONVILLE, FL 32220

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: SHERRY DRYDEN

P

01/04/2008

Electronic Signature of Signing Officer or Director

Date