

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000098778

FILED  
Jan 22, 2008  
Secretary of State

Entity Name: JOHN HALE WINDOWS & DOORS, INC.

## Current Principal Place of Business:

5236 E KALEY ST  
ORLANDO, FL 32812

## New Principal Place of Business:

## Current Mailing Address:

5236 E KALEY ST  
ORLANDO, FL 32812

## New Mailing Address:

FEI Number: 90-0043942

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HALE, JOHN  
5236 E KALEY ST  
ORLANDO, FL 32812 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: D/P ( ) Delete  
Name: HALE, JOHN  
Address: 5236 E KALEY ST  
City-St-Zip: ORLANDO, FL 32812

Title: VP ( ) Delete  
Name: MILLER, MEKENSIE  
Address: 5236 E. KALEY STREET  
City-St-Zip: ORLANDO, FL 32812

Title: S ( ) Delete  
Name: WATSON, MICHAEL  
Address: 5236 E. KALEY STREET  
City-St-Zip: ORLANDO, FL 32812

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

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S/1 (X) Change ( ) Addition  
Name: WATSON, MICHAEL  
Address: 5236 E. KALEY STREET  
City-St-Zip: ORLANDO, FL 32812

Title: T ( ) Change (X) Addition  
Name: HALE, GREGORY D  
Address: 5236 E. KALEY STREET  
City-St-Zip: ORLANDO, FL 32812

Title: S/2 ( ) Change (X) Addition  
Name: CECIL, KUTIS A  
Address: 5236 E. KALEY STREET  
City-St-Zip: ORLANDO, FL 32812

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: JOHN HALE

D/P

01/22/2008

Electronic Signature of Signing Officer or Director

Date