


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90056 037 ***150.00

DOCUMENT # P01000101840 1. Entity Name AMERICA'S MILLWORK INSTALLATIONS, INC.					
Principal Place of Business 900 FOX VALLEY DR #206 LONGWOOD, FL 32779			Mailing Address 900 FOX VALLEY DR #206 LONGWOOD, FL 32779		
2. Principal Place of Business 900 Fox Valley Dr. Suite, Apt. #, etc. Suite 210 City & State Longwood, FL Zip 32779		3. Mailing Address 900 Fox Valley Dr. Suite, Apt. #, etc. Suite 210 City & State Longwood, FL Zip 32779		4. FEI Number 59-3750688	
Country USA		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LINEHAN, JOHN G 204 S SWEETWATER BLVD LONGWOOD, FL 32779				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSD LINEHAN, JOHN G 900 FOX VALLEY DR #206 LONGWOOD, FL 32779 <div style="text-align: right;"><input type="checkbox"/> Delete</div>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD SANDERS, GLENN 900 FOX VALLEY DR #206 LONGWOOD, FL 32779 <div style="text-align: right;"><input type="checkbox"/> Delete</div>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>	
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02142006 Chg-P CR2E034 (11/05)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-23-06 *407-786-8237*