## 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P02000017376

Entity Name: L & S FRAMING INC.

FILED Nov 03, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

19 JAMES DRIVE SHALIMAR, FL 32579

Current Mailing Address: New Mailing Address:

19 JAMES DRIVE SHALIMAR, FL 32579

FEI Number: 04-3595476 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SIMMONS, LEONARD

19 JAMES DRIVE

SHALIMAR, FL 32579

US

SIMMONS, BONNIE L

19 JAMES DRIVE

SHALIMAR, FL 32579

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: BONNIE L. SIMMONS 11/03/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

Title: PD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SWEENEY, SHAWN M
 Name:

 Address:
 19 JAMES DRIVE
 Address:

 City-St-Zip:
 SHALIMAR, FL 32579
 City-St-Zip:

Title: AVP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SCHAEFFER, WILLIAM D JR
 Name:

 Address:
 19 JAMES DRIVE
 Address:

 City-St-Zip:
 SHALIMAR, FL 32579
 City-St-Zip:

Title: AVP () Delete Title: AVP (X) Change () Addition

 Name:
 HEATH, DILLON N
 Name:
 GARY, NICHOLAS

 Address:
 19 JAMES DRIVE
 Address:
 19 JAMES DRIVE

 City-St-Zip:
 SHALIMAR, FL 32579
 City-St-Zip:
 SHALIMAR, FL 32579

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: SHAWN M. SWEENEY PRES 11/03/2009