


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**


**FILED**  
**Feb 11, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # P02000046281**  
 1. Entity Name  
**ALERION DOOR AND GLASS INC.**



Principal Place of Business      Mailing Address  
**725 CLEARLAKE ROAD**      **725 CLEARLAKE ROAD**  
**COCOA, FL 32922**      **COCOA, FL 32922**

**DO NOT WRITE IN THIS SPACE**



01292008    No Chg-P    CR2E034 (11/05)

4. FEI Number <b>37-1428857</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

**6. Name and Address of Current Registered Agent**

**NELSON, CHRISTOPHER J**  
**725 CLEARLAKE ROAD**  
**COCOA, FL 32922**

**DO NOT WRITE IN THIS SPACE**

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
(NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

**9. Election Campaign Financing**        **\$5.00 May Be Added to Fees**  
 Trust Fund Contribution.

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P NELSON, CHRISTOPHER J 725 CLEARLAKE ROAD COCOA, FL 32922
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S NELSON, AUDREY 4055 INDIAN RIVER DRIVE COCOA, FL 32927
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CHURCH, THOMAS J 1692 ANGEL AVENUE MERRITT ISLAND, FL 32952
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

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 02/20/08-80053-025 150.00

**12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.**

**SIGNATURE:**  **CHRISTOPHER NELSON**    **2/8/08**    **(321) 799-8500**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #