2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000050104

FILED Jan 04, 2007 Secretary of State

Entity Nar	me: DOOR T	DOOR ENTERPRISES	, INC.	•		
Current P	rincipal Place	of Business:	New Prin	New Principal Place of Business:		
	LEDOWN CO LM BEACH, FI					
Current M	lailing Addres	ss:	New Mail	New Mailing Address:		
	LEDOWN CO LM BEACH, FI					
FEI Number:	: 01-0708159	FEI Number Applied For () FEI Number Not Ap	plicable () Certificate of Status Desired	d () t	
Name and	Address of C	Current Registered Ager	nt: Name an	d Address of New Registered Agent:		
5800 THIS WEST PAI The above	RY, EARL L PR LEDOWN CO LM BEACH, FI named entity: e of Florida.	URT ₋ 33415 US	the purpose of changing	its registered office or registered agent, o	or both,	
SIGNATUR	RE:					
		ic Signature of Registere	•	Date		
Election Car	npaign Financin	g Trust Fund Contribution()) .			
OFFICERS	S AND DIREC	TORS:	ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	DAUGHTRY, EA		Title: Name: Address: City-St-Zip:	P (X) Change () Addition DAUGHTRY, EARL L P 5800 THISLEDOWN COURT WEST PALM BEACH, FL 33415 US		
Title: Name: Address: City-St-Zip:	DAUGHTRY, Y) Delete VONNE K VP & S OWN CT EACH, FL 33415	Title: Name: Address: City-St-Zip:	V (X) Change () Addition DAUGHTRY, YVONNE K VP & S 5800 THISLEDOWN CT WEST PALM BEACH, FL 33415 US		

Title: T (X) Delete Title: () Change () Addition Name: DAUGHTRY, EARL W T Name:

 Address:
 5800 THISLEDOWN CT
 Address:

 City-St-Zip:
 WEST PALM BEACH, FL 33415 US
 City-St-Zip:

() Delete

WEST PALM BEACH, FL 33415 US

DAUGHTRY, YVONNE K VP, SEC

5800 THISLEDOWN CT

Title:

Name:

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: EARL L DAUGHTRY P 01/04/2007

() Change () Addition