

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000127344

FILED  
Jan 20, 2005  
Secretary of State

Entity Name: THE GARAGE DOOR SUPERSTORE, INC.

## Current Principal Place of Business:

4675 SPRUCE CREEK RD.  
PORT ORANGE, FL 32127

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 291251  
PORT ORANGE, FL 32129

## New Mailing Address:

FEI Number: 57-1140439

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NOYES, AMANDA  
PO BOX 291251  
PORT ORANGE, FL 32129 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: PRES ( ) Delete  
Name: NOYES, VICTOR B  
Address: 7 SELENE PLACE  
City-St-Zip: PALM COAST, FL 32164

Title: ST ( ) Delete  
Name: NOYES, AMANDA  
Address: 7 SELENE PLACE  
City-St-Zip: PALM COAST, FL 32164

Title: V ( ) Delete  
Name: SELMAN, JESSE L  
Address: 7 SELENE PLACE  
City-St-Zip: PALM COAST, FL 32164

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: NOYES, VICTOR B  
Address: 943 ASPEN DR.  
City-St-Zip: S. DAYTONA, FL 32119

Title: S/T (X) Change ( ) Addition  
Name: NOYES, AMANDA  
Address: 943 ASPEN DR.  
City-St-Zip: S. DAYTONA, FL 32119

Title: VP (X) Change ( ) Addition  
Name: SELMAN, JESSE L  
Address: 210 MAURICE ST.  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: AMANDA NOYES

S/T

01/20/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date