

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 03, 2006 8:00 am
Secretary of State

04-03-2006 90405 020 ***150.00

DOCUMENT # P02000130498

1. Entity Name
DOOR SOLUTIONS, INC.



Principal Place of Business
**10330 CHEDOAK DRIVE
BLDG. 300
JACKSONVILLE, FL 32218**

Mailing Address
**C/O SLOTT & BARKER
334 E. DUVAL ST.
JACKSONVILLE, FL 32202**

50008307



03222006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
22-3888246

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**SLOTT, ARNOLD H
334 E. DUVAL ST.
JACKSONVILLE, FL**

**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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PS
BRADBERRY, MICHAEL A
10330 CHEDOAK DRIVE, BLDG. 300
JACKSONVILLE, FL 32218**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPT
BRADBERRY, VICTOR A
10330 CHEDOAK DRIVE, BLDG. 300
JACKSONVILLE, FL 32218**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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**

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Michael A. Bradberry 3/23/06 904-482-0484

SLOTT, BARKER & NUSSBAUM

ATTORNEYS AT LAW

ATTACHMENT
50008302

A PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS

334 EAST DUVAL STREET
JACKSONVILLE, FLORIDA 32202
TELEPHONE (904) 353-0033
TELECOPIER (904) 355-4148

ARNOLD H. SLOTT, P.A.*
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WILLIAM NUSSBAUM, P.A.**
E-mail: nusslaw3@bellsouth.net

* CERTIFIED CIRCUIT CIVIL MEDIATOR
** BOARD CERTIFIED REAL ESTATE LAWYER

March 29, 2006

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, Florida 32302-1500

Re: Brad's Glass Company, Inc.
Document # 498790
Door Control, Inc.
Document # K97995
Door Solutions, Inc.
Document # P02000130498

Ladies and Gentlemen:

I enclose the following:

- (a) Original signed 2005 Uniform Business Report for each of the three corporations listed above;
- (b) Brad's Glass Co., Inc.'s check no. 1697, payable to the Florida Department of State in the amount of \$150.00 to cover your fee for filing the annual report.
- (c) Door Control, Inc.'s check no. 18894, payable to the Florida Department of State in the amount of \$150.00 to cover your fee for filing the annual report.
- (d) Door Solutions, Inc.'s check no. 2178, payable to the Florida Department of State in the amount of \$150.00 to cover your fee for filing the annual report.

If you have any questions, please contact our office.

Very truly yours,

Carol-Anne Hallam

Carol-Anne Hallam, CLA
Certified Legal Assistant

cah

Enclosures

cc: Mr. Michael Bradberry