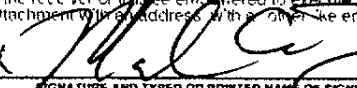


**Apr 13, 2005 08:00 AM**  
**Secretary of State**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                          |                                                                                                                 |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|--|
| <b>DOCUMENT # P02000132008</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                          | <b>Apr 13, 2005 08:00</b><br><b>Secretary of State</b>                                                          |  |
| 1. Entity Name<br><b>ATLANTIC OVERHEAD DOOR COMPANY OF THE EAST COAST, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                          |                                |  |
| Principal Place of Business<br><b>1631 WESTWIND DR<br/>JACKSONVILLE BEACH, FL 32250 US</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                          | Mailing Address<br><b>1631 WESTWIND DR<br/>JACKSONVILLE BEACH, FL 32250 US</b>                                  |  |
| <b>DO NOT WRITE IN THIS SPACE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                          |                               |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                          | 03312005 No Chg-P CR2E034 (10/03)                                                                               |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                          | 4. FCI Number<br><b>65-1164448</b>                                                                              |  |
| 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                          | Applied For<br>Not Applied                                                                                      |  |
| 6. Name and Address of Current Registered Agent<br><b>ROGERS, MARK A<br/>1631 WESTWIND DR<br/>JACKSONVILLE BEACH, FL 32250</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                          | <b>DO NOT WRITE IN THIS SPACE</b>                                                                               |  |
| 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 qualifications of registered agent.                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                          |                                                                                                                 |  |
| SIGNATURE _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                          |                                                                                                                 |  |
| <b>FILE NOW!!! FEE IS \$150.00<br/>After May 1, 2005 Fee will be \$400.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                          | Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> |  |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                          | <b>DO NOT WRITE IN THIS SPACE</b>                                                                               |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY ST ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | PD<br>ROGERS, MARK A<br>1631 WESTWIND DR<br>JACKSONVILLE BEACH, FL 32250 |                                                                                                                 |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY ST ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                          |                                                                                                                 |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY ST ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                          |                                                                                                                 |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY ST ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                          |                                                                                                                 |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY ST ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                          |                                                                                                                 |  |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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 Book 10 or Book 11 if changed, or on an attachment with an address, with a power like empowered. |                                                                          |                                                                                                                 |  |
| SIGNATURE:  <b>Mark A. Rogers</b> <b>4/11/05</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                          |                                                                                                                 |  |