2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2006
Secretary of State

DOCUMENT# P02000134307

Entity Name: EXCEPTIONAL EXTERIORS, INC.

Current Principal Place of Business:

426 HERITAGE WAY
FORT WALTON BEACH, FL 32547

New Principal Place of Business:

399 IOWA STREET
VALPARAISO, FL 32580

Current Mailing Address:

PO BOX 5296
NICEVILLE, FL 32578

New Mailing Address:

FEI Number: 33-1043433 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GROVES, WILLIAM
426 HERITAGE WAY
FORT WALTON BEACH, FL 32547 US

Name and Address of New Registered Agent:

GROVES, WILLIAM
399 IOWA STREET
VALPARAISO, FL 32580 US

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: WILLIAM GROVES 04/29/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: GROVES, WILLIAM
Address: 426 HERITAGE WAY
City-St-Zip: FORT WALTON BEACH, FL 32547

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: GROVES, WILLIAM
Address: 399 IOWA STREET
City-St-Zip: NICEVILLE, FL 32580

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.

SIGNATURE: WILLIAM GROVES P 04/29/2006
Electronic Signature of Signing Officer or Director Date