

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000007025

**FILED
Jun 28, 2009
Secretary of State**

Entity Name: CLEAR VIEW WINDOW INSTALLATIONS, INC.

Current Principal Place of Business:

3110 HALLOW DRIVE
DELTONA, FL 32738

New Principal Place of Business:

Current Mailing Address:

3110 HALLOW DRIVE
DELTONA, FL 32738

New Mailing Address:

FEI Number: 02-0669051 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HENSLEE, DAVID MICHAEL
3110 HALLOW DRIVE
DELTONA, FL 32738 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

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: HENSLEE, DAVID M PTD
Address: 3110 HALLOW DRIVE
City-St-Zip: DELTONA, FL 32738

Title: VP () Delete
Name: HENSLEE, LAURA C VP
Address: 3110 HALLOW DRIVE
City-St-Zip: DELTONA, FL 32738

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: HILL, TOMMIE M VP
Address: 3120 HALLOW DRIVE
City-St-Zip: DELTONA, FL 32738

Title: S () Change (X) Addition
Name: HENSLEE, LAURA C S
Address: 3110 HALLOW DRIVE
City-St-Zip: DELTONA, FL 32738

I hereby certify that the information supplied with this filing does not qualify 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: DAVID MICHAEL HENSLEE

PTD

06/28/2009

Electronic Signature of Signing Officer or Director

_____ Date