

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 16, 2004 8:00 am
Secretary of State

05-03-2004 90392 032 ***150.00

DOCUMENT # P03000023857

1. Entity Name
AMERICAN ARCHITECTURAL EXTERIORS, INC.



Principal Place of Business

11246 DISTRIBUTION AVE. E #8
JACKSONVILLE FL 32256

Mailing Address

11246 DISTRIBUTION AVE. E #8
JACKSONVILLE FL 32256

66428373

2. Principal Place of Business

Suite, Apt. #, etc.
11246 Distribution

3. Mailing Address

Suite, Apt. #, etc.
11246 Distribution AVE E

City & State

JAX FL

City & State

JAX FL

Zip

32256

Country

USA

Zip

32256

Country

USA

4. FEI Number

04-3743846

Applied For

Not Applicable

5. Certificate of Status Desired

8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MCINTYRE, THERESA
11246 DISTRIBUTION AVE. E #8
JACKSONVILLE FL 32256

7. Name and Address of New Registered Agent

Name: TOMMY FIELDS
Street Address (P.O. Box Number is Not Acceptable): 1838 DOYON CT
City: JACKSONVILLE FL Zip Code: 32210

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, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PSTD	☐ Delete
NAME	MCINTYRE, THERESA	
STREET ADDRESS	11046 MANDARIN STATION DR. W	
CITY - ST - ZIP	JACKSONVILLE FL 32257	
TITLE	V	☐ Delete
NAME	COLBURN, BRIAN	
STREET ADDRESS	8210 FREE AVE.	
CITY - ST - ZIP	JACKSONVILLE FL 32211	
TITLE	S	☒ Delete
NAME	STEVENS, MARK	
STREET ADDRESS	4604 QUEEN LANE	
CITY - ST - ZIP	JACKSONVILLE FL 32210	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☒ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ Change ☒ Addition
NAME	TREASURER	
STREET ADDRESS	Tommy Fields	
CITY - ST - ZIP	1838 Doyon Ct	
	JACKSONVILLE FL 32210	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
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)(i), 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 #

Attachment
06428323
#P03000023857 10 Whom it May Concern:

The enclosed document has
been corrected, please note the
change of address (different suite #).
We did not received this letter
until JUNE 9, 2004, because of
the change of address. This letter
was written per phone call of
850-245-6056

Sincerely

Tony Lila