

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000102334

FILED
Jan 08, 2008
Secretary of State

Entity Name: AFFORDABLE GARAGE DOOR SERVICES, INC.

Current Principal Place of Business:

8845 103 STREET
JACKSONVILLE, FL 32210 US

New Principal Place of Business:

1765 SHOAL CREEK CIR
GREEN COVE SPRINGS, FL 32043 US

Current Mailing Address:

1765 SHOAL CREEK CIRCLE
GREEN COVE SPRINGS, FL 32043 US

New Mailing Address:

FEI Number: 56-2396584 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREY, LAWANA
1765 SHOAL CREEK CIRCLE
GREEN COVE SPRINGS, FL 32043 US

Name and Address of New Registered Agent:

ALL FLORIDA FIRM INC
813 DELTONA BLVD
ST A
DELTONA, FL 32725 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: VICTOR M ERWIN

01/08/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FREY, TOM
Address: 8845 103 STREET
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: VP () Delete
Name: FREY, LAWANA
Address: 8845 103 STREET
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: SEC. (X) Delete
Name: FREY, LAWANA
Address: 8845 103 STREET
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: TREA (X) Delete
Name: FREY, LAWANA
Address: 8845 103 STREET
City-St-Zip: JACKSONVILLE, FL 32210 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FREY, TOM
Address: 1765 SHOAL CREEK CIR
City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

Title: VP (X) Change () Addition
Name: FREY, LAWANA
Address: 1765 SHOAL CREEK CIR
City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

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

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

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: THOMAS FREY

P

01/08/2008

Electronic Signature of Signing Officer or Director

Date