

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000109842

FILED
Apr 12, 2007
Secretary of State

Entity Name: GABLE WINDOW REPLACEMENT INC.

Current Principal Place of Business:

10681 JACAMAR DRIVE
NEW PORT RICHEY, FL 34654

New Principal Place of Business:

10681 JACAMAR DRIVE
NEW PORT RICHEY, FL 34654 US

Current Mailing Address:

10681 JACAMAR DRIVE
NEW PORT RICHEY, FL 34654

New Mailing Address:

10681 JACAMAR DRIVE
NEW PORT RICHEY, FL 34654 US

FEI Number: 20-0312656

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GABLE, JOEL
Address: 10681 JACAMAR DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: VP () Delete
Name: GABLE, CHRISTINE
Address: 10681 JACAMAR DR
City-St-Zip: NEW PORT RICHEY, FL 34654

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GABLE, JOEL
Address: 10681 JACAMAR DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34654 US

Title: VP (X) Change () Addition
Name: GABLE, CHRISTINE
Address: 10681 JACAMAR DR
City-St-Zip: NEW PORT RICHEY, FL 34654 US

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: CHRISTINE GABLE

VP

04/12/2007

Electronic Signature of Signing Officer or Director

Date