

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000110266

Entity Name: STRAWSON FRAMING, INC.

**FILED**  
**Jul 12, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

5480 HAPPY HOLLOW ROAD  
PUNTA GORDA, FL 33982

**New Principal Place of Business:**

**Current Mailing Address:**

5480 HAPPY HOLLOW ROAD  
PUNTA GORDA, FL 33982

**New Mailing Address:**

FEI Number: 20-0253002

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

STRAWSON, THOMAS W JR  
5480 HAPPY HOLLOW ROAD  
PUNTA GORDA, FL 33982 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: DP  
Name: STRAWSON, THOMAS W JR  
Address: 5480 HAPPY HOLLOW RD  
City-St-Zip: PUNTA GORDA, FL 33950

Title: V  
Name: STRAWSON, LISA  
Address: 5480 HAPPY HOLLOW ROAD  
City-St-Zip: PUNTA GORDA, FL 33982

Title: S  
Name: SANDERS, GREG  
Address: 5480 HAPPY HOLLOW RD  
City-St-Zip: PUNTA GORDA, FL 33982

I hereby 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 all other like empowered.

SIGNATURE: LISA STRAWSON

V

07/12/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date