

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P03000116793

1. Entity Name
FLORIDA ARCHITECTURAL PRODUCTS HOLDING
COMPANY



Principal Place of Business
170 AIRPARK BOULEVARD
IMMOKALEE, FL 34142

Mailing Address
170 AIRPARK BOULEVARD
IMMOKALEE, FL 34142

**FILED
Apr 28, 2006 08:00 AM
Secretary of State**



04202006 No Chg-P CR2E034 (11/05)

4. FEI Number 20-0422994	Applied For Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

WHITESMAN, GUY E
1715 MONROE STREET
FORT MYERS, FL 33901

**DO NOT WRITE
IN THIS SPACE**

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, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME LLEVAT, HECTOR
STREET ADDRESS 1280 SW 142 CT.
CITY-ST-ZIP MIAMI, FL 33184

TITLE ST
NAME TUCKER, BILL
STREET ADDRESS 3820 13TH AVE.
CITY-ST-ZIP NAPLES, FL 34117

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000545159
05/11/06-80065-014 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *William Tucker, President*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #