

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000124959

FILED
Apr 16, 2008
Secretary of State

Entity Name: CAMPESE PRECISION SIDING, INC.

Current Principal Place of Business:

12447 SW COUNTY RD. ROUTE 769
LAKE SUZY, FL 34269

New Principal Place of Business:

12145 TAMiami TRAIL S
UNIT B
NORTH PORT, FL 34287

Current Mailing Address:

12447 SW COUNTY RD. ROUTE 769
LAKE SUZY, FL 34269

New Mailing Address:

12145 TAMiami TRAIL S
UNIT B
NORTH PORT, FL 34287

FEI Number: 41-2115051

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FREITAS, TERRA L
12447 SW COUNTY RD. ROUTE 769
LAKE SUZY, FL 34269 US

Name and Address of New Registered Agent:

SERGEANT, JENNIFER S
18613 BRIGGS CIRCLE
PORT CHARLOTTE, FL 33948 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: JENNIFER S. SERGEANT

04/16/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: CAMPESE, JOSEPH L
Address: 12447 SW COUNTY RD. ROUTE 769
City-St-Zip: LAKE SUZY, FL 34269

Title: VP (X) Delete
Name: CAMPESE, SAMUEL D
Address: 469 MADEIRA STREET
City-St-Zip: PORT CHARLOTTE, FL 33953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: CAMPESE, JOSEPH L
Address: 175 KINGS HIGHWAY UNIT 1122
City-St-Zip: PUNTA GORDA, FL 33983

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: JOSEPH L. CAMPESE

PST

04/16/2008

Electronic Signature of Signing Officer or Director

Date