2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000128109

FILED Jan 12, 2005 8:00 am Secretary of State 01-12-2005 90001 004 ***150.00

1. Entity Nam ROGER V		GTON TRIM &	TILE, IN	IC	(
Principal Place of Business 2108 VIZCAYA DRIVE NAVARRE, FL 32566			2	Mailing Address 2108 VIZCAYA DRIVE NAVARRE, FL 32566				•		,			567
2. Principal Place of Business			3. :	3. Mailing Address									
Suite, Apt. #, etc.				Suite, Apt. #, etc.				01062005	Chg-P	С	R2E034 (10/	03)	,
City & State			(City & State				4. FEI Number 74-311	_			_ · ·	olied For Applicable
Zip	Country			Zip Cour		у		5 Certificate of Status Desired				3.75 Additional e Required	
	6. Name	and Address of Cur	rent Regis	tered Agent				-7Name and	Address of	New Regist	tered Agent		
WHITTINGTON, ROGER V 2108 VIZCAYA DRIVE NAVARRE, FL 32566						Name Street A	ddress (P.O. Box Numb	er is Not Acce	eptable)			
						Cily					<u> FL </u>	Code	
	ions of regist	ered agent.		ourpose of changing it	s registered	d office of	registei	red agent, or bo	th, in the Stati			with, a	and accept
	Signature, typed	or printed name of registered	agent and title	f applicable, (NO	TE: Registered	Agent signati	ure required	1 when reinstating)			DATE		
		FEE IS \$150.00 5 Fee will be \$5		Election Campa Trust Fund Con		ing 🗆		.00 May Be led to Fees					
10.	OFFICERS AND DIRECTORS							ADDITIONS.	CHANGES T	O OFFICER	S AND DIREC	TORS	IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2108 VIZ	GTON, ROGER V CAYA DRIVE E, FL 32566		☐ Delete	TITLE NAME STREET CITY-S	I ADDRESS ST-ZIP					□ Ch	inge	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	TITLE NAME STREET CITY-S	I ADORESS ST - ZIP	D Col 210 NA	NNIE S 18 VIZ VARRE	Tou CAYA FL 3	ERS DR 3256	□ ch	ange	Addition
TITLE NAME STREET ADDRESS* CITY-ST-ZIP	-			☐ Delete	TITLE NAME STREE CITY-S	ADDRESS					☐ Ch	ange	Addition
TITLE NAME STREET ADDRESS CITY-SI-ZIP				☐ Delete	NAME STREET CITY-S	i address St-Zip					☐ Ch	ange	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete		T ADDRESS ST-ZIP		-			Ch	ange	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	CITY-	1 ADDRESS S1-ZIP					☐ Ch		Addition
12. I hereby	certify that th	e information supplie	d with this f	iling does not qualify f	or the exem	notion sta	ted in S	ection 119.07(3)	(i), Florida Sta	atutes. I furti	her certify that	the in	formation

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 eath; 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: