

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 10, 2004 8:00 am
Secretary of State

07-22-2004 90004 025 ***558.75

DOCUMENT # P03000128619 1. Entity Name KEY ALUMINUM & VINYL SUPPLY, INC.					
Principal Place of Business 7036 PINE FOREST ROAD PENSACOLA, FL 32526			Mailing Address 7036 PINE FOREST ROAD PENSACOLA, FL 32526		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		City & State		4. FFL Number 83-0376410	
5. Certificate of Status Desired ☒		\$8.75 Additional Fee Required		Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent STROUD, JAMES DONALD JR 7036 PINE FOREST ROAD PENSACOLA, FL 32526				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				DATE 7-20-04	
SIGNATURE: <i>Elizabeth H. Stroud</i> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agents signature required when renewing)				DATE	
FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. ☐ Delete STROUD, JAMES DONALD JR 7036 PINE FOREST ROAD PENSACOLA, FL 32526		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. ☐ Delete STROUD, ELIZABETH H 7036 PINE FOREST ROAD PENSACOLA, FL 32526		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <i>Elizabeth H. Stroud</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED OFFICER OR DIRECTOR				DATE 7-20-04	