

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 27, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000130680

1. Entity Name
SANDERS VINYL & ALUMINUM, INC.



Principal Place of Business
**3770 FOX HUNT RD.
CHIPLEY, FL 32428**

Mailing Address
**3770 FOX HUNT RD.
CHIPLEY, FL 32428**



02222005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
11-3708460

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SANDERS, TIMOTHY
3758 FOX HUNT RD.
CHIPLEY, FL 32428**

**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

Timothy J. Sanders

4-26-05

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, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SANDERS, TIMOTHY
STREET ADDRESS	3758 FOX HUNT RD.
CITY-ST-ZIP	CHIPLEY, FL 32428
TITLE	V
NAME	SANDERS, SCARLAT
STREET ADDRESS	3758 FOX HUNT RD.
CITY-ST-ZIP	CHIPLEY, FL 32428
TITLE	S
NAME	SANDERS, CHRISTOPHER
STREET ADDRESS	1850 FOREST AVE.
CITY-ST-ZIP	CHIPLEY, FL 32428

000000334590
04/27/05-80050-015 150.00

**DO NOT WRITE
IN THIS SPACE**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

4-26-05 850-723-2899

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #