

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000131496

FILED  
Jan 11, 2004  
Secretary of State

Entity Name: BEST BIDS VINYL SIDING & SOFFITS, INC.

## Current Principal Place of Business:

5291 COLLINS ROAD  
424  
JACKSONVILLE, FL 32244 US

## New Principal Place of Business:

## Current Mailing Address:

5291 COLLINS ROAD  
424  
JACKSONVILLE, FL 32244 US

## New Mailing Address:

FEI Number: 90-0130557      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NORMAN, MELISSA K  
5291 COLLINS ROAD  
424  
JACKSONVILLE, FL 32244 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: NORMAN, TIMOTHY A SR.  
Address: 5291 COLLINS ROAD # 424  
City-St-Zip: JACKSONVILLE, FL 32244

Title: CS ( ) Delete  
Name: NORMAN, MELISSA K  
Address: 5291 COLLINS ROAD # 424  
City-St-Zip: JACKSONVILLE, FL 32244

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: NORMAN, MELISSA K  
Address: 5291 COLLINS ROAD # 424  
City-St-Zip: JACKSONVILLE, FL 32244

Title: VP ( ) Change (X) Addition  
Name: HAMILTON, BILLY W  
Address: 4075 BRONCO ROAD  
City-St-Zip: MIDDLEBURG, FL 32068

Title: T ( ) Change (X) Addition  
Name: BRACKETT, JASON L  
Address: 437 NORTH MIMOSA AVENUE  
City-St-Zip: MIDDLEBURG, FL 32068

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MELISSA NORMAN

S

01/11/2004

Electronic Signature of Signing Officer or Director

Date