

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000131496

FILED
Apr 29, 2005
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:

4212 SCENIC DRIVE
MIDDLEBURG, FL 32068 US

Current Mailing Address:

5291 COLLINS ROAD
424
JACKSONVILLE, FL 32244 US

New Mailing Address:

4212 SCENIC DRIVE
MIDDLEBURG, FL 32068 US

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:

NORMAN, MELISSA K
4212 SCENIC DRIVE
MIDDLEBURG, FL 32068 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: MELISSA NORMAN

04/29/2005

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NORMAN, TIMOTHY A SR.
Address: 4212 SCENIC DRIVE
City-St-Zip: MIDDLEBURG, FL 32068

Title: S (X) Change () Addition
Name: NORMAN, MELISSA K
Address: 4212 SCENIC DRIVE
City-St-Zip: MIDDLEBURG, FL 32068

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

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

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

04/29/2005

Electronic Signature of Signing Officer or Director

Date