

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000135282

Entity Name: WALLS AND WINDOWS CORP

FILED
Jan 24, 2005
Secretary of State

Current Principal Place of Business:

10835 BLUE PACIFIC CT
JACKSONVILLE, FL 32257 US

New Principal Place of Business:

559 LONGMILL LANE
ORANGE PARK, FL 32065 US

Current Mailing Address:

10835 BLUE PACIFIC CT
JACKSONVILLE, FL 32257 US

New Mailing Address:

559 LONGMILL LN
ORANGE PARK, FL 32065 US

FEI Number: 56-2423435

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOLLIFFE, PAUL
10835 BLUE PACIFIC CT
JACKSONVILLE, FL 32257 US

Name and Address of New Registered Agent:

JOLLIFFE, PAUL
559 LONGMILL LANE
ORANGE PARK, FL 32065 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: PAUL JOLLIFFE

01/24/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JOLLIFFE, PAUL
Address: 10835 BLUE PACIFIC CT
City-St-Zip: JACKSONVILLE, FL 32257

Title: VP () Delete
Name: JOLLIFFE, MIGDALIA
Address: 10835 BLUE PACIFIC CT
City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JOLLIFFE, PAUL
Address: 559 LONGMILL LN
City-St-Zip: ORANGE PARK, FL 32065 US

Title: VP (X) Change () Addition
Name: JOLLIFFE, MIGDALIA
Address: 559 LONGMILL LN
City-St-Zip: ORANGE PARK, FL 32065 US

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: PAUL JOLLIFFE

P

01/24/2005

Electronic Signature of Signing Officer or Director

Date