


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000137648

1. Entry Name
FRANCIS SIDING, INC.



Principal Place of Business
**2531 GLENWOOD DR
 EDGEWATER, FL 32141**

Mailing Address
**2531 GLENWOOD DR
 EDGEWATER, FL 32141**

DO NOT WRITE IN THIS SPACE



01082005 No Chg-P CR2E034 (10/03)

4. FEI Number
20-0349330 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**FRANCIS, WILLIAM C
 2531 GLENWOOD DR
 EDGEWATER, FL 32141**

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 _____ (NOTE: Registered Agent signature required when re-registering) 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 NAME STREET ADDRESS CITY-ST-ZIP	DP FRANCIS, WILLIAM C 2531 GLENWOOD DR EDGEWATER, FL 32141
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS FRANCIS, RICHARD J 2726 INDIA PALM DR EDGEWATER, FL 32141
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT FRANCIS, ROBERT P 2724 INDIA PALM DR EDGEWATER, FL 32141
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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)(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: *William C Francis* **WILLIAM C FRANCIS** 1-9-05 1-396-427-2760

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #