## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jan 27, 2006 08:00 AM Secretary of State

ANNUAL REPORT				Secretary of State			
DOCU	MENT # P03000140		}	Socie	oury o		
1. Emity Nam JERRY'S	S VINYL SIDING, INC.						
· ·	e of Business ROUND ROAD 32577	Mailing Address 6105 FAIRGROUND ROAD MOLINO, FL 32577		E PERROMEN A	: - 11 CENER UNIVERNITE BERNE BERNE	S STEW STATE SESSE STATES	F.
Ē	OO NOT WRITE	CE	O1172006 No Chg-P CR2E034 (11/05)      4. FEI Number				
	S, JERRY W RGROUND ROAD	DO NOT WRITE IN THIS SPACE					
8. The above the obligat	named entity submits this statement for tions of registered agent.	the purpose of changing its register	red office or register	ed agent, or bo	th, in the State of Flor	ida. I am familia	r with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent an	diffe if applicable fitOTE Register	ed Agent signature required	when reinstating)	<del></del>	DATE	<u> </u>
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.0	ncing \$5.	00 May Be ed to Fees		<del></del>	ī.	
10.	OFFICERS AND D	RECTORS	1		<u></u>		
TITLE MAME STREET ADDRESS CITY-ST-ZIP	PSD NELLUMS, JERRY W 6105 FAIRGROUND ROAD MOLINO, FL 32577	-			U000004 02/07/ <b>06</b> -	405960	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD RASMUSSEN, DARREL Y 1800 NESTLE DRIVE PENSACOLA, FL 32534				02/01/0b=	. 117-114	150.00
title Name Street address City-S1-ZIP				DO	NOT W	RITE	
TIPLE NAME STREET ADDRESS CITY-ST-DP		-		IN T	THIS SP	ACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP					• .		

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 eath; 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:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING DEFICER OR DIRECTOR

P50-232-06-06