2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 16, 2008 08:00 Al Secretary of State DOCUMENT # P03000141322 1. Entity Name WILLIAMSON VINYL SIDING, INC. Principal Place of Business Mailing Address 5208 HIGHWAY 178 5208 HIGHWAY 178 MILTON, FL 32570 MILTON, FL 32570 No Chq-P CR2E034 (11/05) 03142008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0455641 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WILLIAMSON, CHARLES E DO NOT WRITE 5208 HIGHWAY 178 MILTON, FL 32570 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS 0000000899158 04/28708-80028-002 150.00 TITLE NAME WILLIAMSON, CHARLES E 5208 HIGHWAY 178 STREET ADDRESS CITY-ST-ZIP MILTON, FL 32570 TITLE BURGESS, GERALD III NAME STREET ADDRESS 5208 HIGHWAY 178 CITY-ST-ZIP MILTON, FL 32570 TITLE WILLIAMSON, BETTY R NAME 5208 HIGHWAY 178 STREET ADDRESS DO NOT WRITE CITY-ST-ZIP MILTON, FL 32570 TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME

12. I hereby certify that the information supplied with this filing 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 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:

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-10-08

(850) 4506144

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