2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000145042

Entity Name: B & B SOFFIT & FASCIA, INC.

FILED Feb 01, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 9810 ETHEL STREET GIBSONTON, FL 33534 **Current Mailing Address: New Mailing Address:** P.O. BOX 672 GIBSONTON, FL 33534 FEI Number: 20-0406506 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GILDER, TINA 9810 ETHEL STREET GIBSONTON, FL 33534 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PSD () Delete Title: () Change () Addition Name: GILDER, JAMES Name: 9810 ETHEL STREET Address: Address: City-St-Zip: GIBSONTON, FL 33534 City-St-Zip: Title: Title: TD () Delete () Change () Addition Name: GILDER, TINA Name: 9810 ETHEL STREET Address: Address: GIBSONTON, FL 33534 City-St-Zip: City-St-Zip: Title: Title: () Delete (X) Change () Addition BIRKHEAD, CHRIS WORRELL, JEFFERY Name: Name: 6704 RIVERVIEW DR. LOT #11 9903 ETHEL ST Address: Address: City-St-Zip: RIVERVIEW, FL 33569 City-St-Zip: GIBSONTON, FL 33534 Title: () Delete Title: (X) Change () Addition PETRY, MICHAEL EVANS, CHARLES Name: Name: Address: 6906 ESTELLE AVE. Address: 7018 KRYCUL AVE City-St-Zip: GIBSONTON, FL 33534 City-St-Zip: RIVERVIEW, FL 335698 Title: Title: () Change (X) Addition () Delete LECLERE, BRANDON Name: Name: Address: 11512 RAULERSON RD Address: City-St-Zip: City-St-Zip: RIVERVIEW, FL 33569 Title: () Delete Title: () Change (X) Addition Name: Name: EVANS, BRIAN 7713 RIVERVIEW DR. Address: Address: City-St-Zip: City-St-Zip: RIVERVIEW, FL 33569

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: TINA GILDER TD 02/01/2005