

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000146252

FILED
May 08, 2009
Secretary of State

Entity Name: EAGLE SOFFITT & SIDING CORP

Current Principal Place of Business:

5612 HARBOR CHASE CIRCLE
3
ORLANDO, FL 32839 US

Current Mailing Address:

5612 HARBOR CHASE CIRCLE
3
ORLANDO, FL 32839 US

New Principal Place of Business:

4706 EMERALD FOREST WAY
304
ORLANDO, FL 32811 US

New Mailing Address:

4706 EMERALD FOREST WAY
304
ORLANDO, FL 32811 US

FEI Number: 20-0455927

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACCOUNT BOOKKEEPING CORP
5950 LAKEHURST DR
246
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

SILVA, NILTON
4706 EMERALD FOREST WAY
304
ORLANDO, FL 32811 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: NILTON SILVA

05/08/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SILVA, NILTON S
Address: 5612 HARBOR CHASE CIRCLE APT 3
City-St-Zip: ORLANDO, FL 32839 US

Title: DVP (X) Delete
Name: SILVA, OLI M
Address: 5612 HARBOR CASE CIRCLE APT 3
City-St-Zip: ORLANDO, FL 32839 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SILVA, NILTON S
Address: 4706 EMERALD FOREST WAY STE 304
City-St-Zip: ORLANDO, FL 32811 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: NILTON SILVA

DP

05/08/2009

Electronic Signature of Signing Officer or Director

Date