2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000148206

MAGIC OVERHEAD DOOR CO., INC.



FILED Jan 24, 2008 08:00 AN Secretary of State

Not Applicable

Principal Place of Business

528 N BEACH ST DAYTONA BEACH, FL 32114 Mailing Address

528 N BEACH ST

DAYTONA BEACH, FL 32114



DO NOT WRITE IN THIS SPACE

CR2E034 (11/05) 01042008 No Chg-P Applied For 4. FEI Number

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

6. Name and Address of Current Registered Agent

RUCK, GEORGE D 528 N BEACH ST DAYTONA BEACH, FL 32114

DO NOT WRITE IN THIS SPACE

20-0492737

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 Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when remaining) DATE					
	E NOW!!! FEE IS \$150.00 by 1, 2008 Fee will be \$550.00	Election Campaign Finan- Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP RUCK, GEORGE D 307 JESSAMINE BLVD DAYTONA BEACH, FL 32118				U00000792790 01/24/08-80023-011 150.00
TITLE NAME STREET ADDRESS CITY-SI-ZIP	DV RUCK, BRADY C 90 HIDDEN HILLS DR ORMOND BEACH, FL 32174				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST HOOPER, CHRISTOPHER SCOTT 224 HARTFORD AVE DAYTONA BEACH, FL 32118			DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					

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.

TITLE NAME STREET ADDRESS

386-253-5396