

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P04000008952

1. Entity Name
HAND CUT SOFFIT & SIDING SYSTEMS INC.



**FILED
Apr 13, 2005 8:00 am
Secretary of State**

04-13-2005 90068 032 ***150.00

Principal Place of Business
19224 ELIJAH MORRIS RD
BLOUNTSTOWN, FL 32424

Mailing Address

19224 ELIJAH MORRIS RD
BLOUNTSTOWN, FL 32424



2. Principal Place of Business
13803 SW CR 275

Suite, Apt. #, etc.

3. Mailing Address
13803 SW CR 275

Suite, Apt. #, etc.

04082005 Chg-P CR2E034 (10/03)

City & State
BLOUNTSTOWN, FL

City & State
BLOUNTSTOWN, FL

4. FEI Number
20-0701853

Applied For
Not Applicable

Zip
32424

Country
USA

Zip
32424

Country
USA

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

6. Name and Address of Current Registered Agent

WILSON, RAY
19224 ELIJAH MORRIS RD
BLOUNTSTOWN, FL 32424

Name

Street Address (P.O. Box Number is Not Acceptable)

FL Zip Code

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 reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME WILSON, RAY
STREET ADDRESS 19224 ELIJAH MORRIS RD
CITY-ST-ZIP BLOUNTSTOWN, FL 32424

Delete

TITLE V
NAME WILSON, JUDY
STREET ADDRESS 19224 ELIJAH MORRIS RD
CITY-ST-ZIP BLOUNTSTOWN, FL 32424

Delete

TITLE S
NAME WILSON, MORGAN
STREET ADDRESS 19224 ELIJAH MORRIS RD
CITY-ST-ZIP BLOUNTSTOWN, FL 32424

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME WILSON, RAY
STREET ADDRESS 13803 SW CR 275
CITY-ST-ZIP BLOUNTSTOWN, FL 32424

Change Addition

TITLE V
NAME WILSON, JUDY
STREET ADDRESS 13803 SW CR 275
CITY-ST-ZIP BLOUNTSTOWN, FL 32424

Change Addition

TITLE S
NAME WILSON, MORGAN
STREET ADDRESS 13803 SW CR 275
CITY-ST-ZIP BLOUNTSTOWN, FL 32424

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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: *Judy Wilson* *Judy Wilson*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

411105 (850)674-1695
Date Daytime Phone #