## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## FILED Jul 11, 2005 8:00 am Secretary of State

(352) 625-9477

Daytime Phone #

07-11-2005 90121 002 \*\*\*550 00 DOCUMENT # PO40000 85855 1. Entity Name LUNAY GARAGE DOORS INC 14018449 DO NOT WRITE IN THIS SPACE 3. Mailing Address 2. Principal Place of Business 17145 NE 38th LANE ROAD Suite, Apt. #; etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For SILVER SPRINGS, FL 41-2161082 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 34488 7. Name and Address of Current Registered Agent Name STEPHAN R. LUNAY DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 17145 NE 38th LANE ROAD City OCALA Zip Code FI 34488 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. STEPHAN R. LUNAY, PRESIDENT Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 9. Election Campaign Financing \$5.00 May Be Amended UBR is \$61.25 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. TITLE PRESIDENT TITLE NAME STEPHAN R. LUNAY NAME 17145 NE 38th LANE ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SILVER SPRINGS, FL 34488 CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 the my name appears in Block 10 or on an attachment with an address, with all other like empowered.

STEPHAN R. LUNAY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: