## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000112804

FILED Apr 26, 2009 Secretary of State

Entity Name: DANIELS ALUMINUM AND SCREEN MAINTENANCE INC.

**New Principal Place of Business: Current Principal Place of Business:** 5630 MT OLIVE RD POLK CITY, FL 33868 **Current Mailing Address: New Mailing Address:** 5630 MT OLIVE RD 5630 MT OLIVE RD. POLK CITY, FL 33868 POLK CITY, FL 33868 FEI Number: 74-3127227 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: DANIELS, CYNTHIA J 5630 MT OLIVE RD POLK CITY, FL 33868 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: () Delete Title: () Change () Addition DANIELS, JAMES Name: Name: 5630 MT OLIVE RD Address: Address: City-St-Zip: POLK CITY, FL 33868 City-St-Zip: Title: VΡ Title: () Change () Addition () Delete Name: DANIELS, CYNTHIA J Name: 5630 MT OLIVE RD Address: Address: POLK CITY, FL 33868 City-St-Zip: 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: CYNTHIA DANIELS VP 04/26/2009