

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000113309

Entity Name: A-N-R DOOR SYSTEMS, INC.

FILED
Apr 21, 2009
Secretary of State

Current Principal Place of Business:

1020 OCOEE-APOPKA ROAD
SUITE 100
APOPKA, FL 32703

Current Mailing Address:

1020 OCOEE-APOPKA ROAD
SUITE 100
APOPKA, FL 32703

New Principal Place of Business:

531 COOPER INDUSTRIAL PARKWAY
SUITE A
APOPKA, FL 32703

New Mailing Address:

531 COOPER INDUSTRIAL PARKWAY
SUITE A
APOPKA, FL 32703

FEI Number: 05-0606890

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AULT, JOHN W
3895 ONDICH ROAD
APOPKA, FL 32712 US

Name and Address of New Registered Agent:

AULT, JOHN W
648 BROOKFIELD PLACE
APOPKA, FL 32712 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:

04/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D P () Delete
Name: AULT, JOHN W
Address: 3895 ONDICH ROAD
City-St-Zip: APOPKA, FL 32712

Title: D VP () Delete
Name: REEVES, MARK D
Address: 19121 LADYBUG LANE
City-St-Zip: GROVELAND, FL 34736

Title: O () Delete
Name: SMITH, RUSSELL L
Address: 36535 EAGLE DRIVE
City-St-Zip: GRAND ISLAND, FL 32735

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D P (X) Change () Addition
Name: AULT, JOHN W
Address: 648 BROOKFIELD PLACE
City-St-Zip: APOPKA, FL 32712

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

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: JOHN W. AULT

D P

04/21/2009

Electronic Signature of Signing Officer or Director

Date