

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000129539

FILED
Feb 07, 2005
Secretary of State

Entity Name: MID-STATE WINDOW REPAIR AND INSTALLATION, INC.

Current Principal Place of Business:

319 NORTH ADAMS STREET
BUSHNELL, FL 33513

New Principal Place of Business:

Current Mailing Address:

319 NORTH ADAMS STREET
BUSHNELL, FL 33513

New Mailing Address:

PO BOX 265
CENTER HILL, FL 33514

FEI Number: 20-1773271

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRANKLIN, RONALD E
7152 SUNNYSIDE DRIVE
LEESBURG, FL 34748 US

Name and Address of New Registered Agent:

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:

Title: DPVP () Delete
Name: ALVARADO, ARTURO
Address: POST OFFICE BOX 265
City-St-Zip: CENTER HILL, FL 33514

Title: ST () Delete
Name: FRANKLIN, NICHOLAS E
Address: 12892 COUNTY ROAD 727
City-St-Zip: WEBSTER, FL 33597

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change () Addition
Name: FRANKLIN, NICHOLAS E
Address: 12892 COUNTY ROAD 727
City-St-Zip: WEBSTER, FL 33597

Title: S () Change (X) Addition
Name: CARDONA, JACOB
Address: PO BOX 951
City-St-Zip: WILDWOOD, FL 34785

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ARTURO ALVARADO

DPVP

02/07/2005

Electronic Signature of Signing Officer or Director

Date