## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000141216

1. Entity Name

FIRST COAST EXTERIORS INC



FILED Jan 17, 2008 08:00 A Secretary of State

Principal Place of Business

136 TAYLOR ROAD PALATKA, FL 32177 Mailing Address

136 TAYLOR ROAD PALATKA, FL 32177



DO NOT WRITE IN THIS SPACE

01092008 No Chg-P CR2E034 (11/05)

4. FEI Number
20-1732112

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WILLIAMS, PATRICIA M 136 TAYLOR ROAD PALATKA, FL 32177

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	ove named entity submits this statement for the p gations of registered agent.	surpose of changing its registered office or registered agent, or both	h, in the State of Florida. I am familiar with, and accept
SIGNATUR	Signature, typed or printed name of registered agent and title i	f approable (NOTE: Registered Agent signature required when reinstating)	DATE
	ILE NOW!!! FEE IS \$150.00 May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees	000000787374 01/17/08-80078-022 150.00
10.	OFFICERS AND DIRECTORS		
TITLE	PRES		

## NAME WILLIAMS, KARL L SR STREET ADDRESS 136 TAYLOR ROAD CITY-ST-ZIP PALATKA,, FL 32177 TITLE WILLIAMS, PATRICIA M NAME STREET ADDRESS 136 TAYLOR ROAD CITY-ST-ZIP PALATKA, FL 32177 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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12. It hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 aggress, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-9-2005

386-325-2703

Daytime Phone #