

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000161276

FILED  
Jan 30, 2006  
Secretary of State

Entity Name: SUMMERTIME SCREEN ENCLOSURES, INC.

## Current Principal Place of Business:

700 SOUTH PARK AVENUE  
SANFORD, FL 32771

## New Principal Place of Business:

## Current Mailing Address:

5245 TOWER WAY  
SANFORD, FL 32773

## New Mailing Address:

FEI Number: 20-1984984

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BREEHL, KATHERINE F  
700 SOUTH PARK AVENUE  
SANFORD, FL 32771 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: DP ( ) Delete  
Name: BREEHL, LEONARD J JR  
Address: 700 SOUTH PARK AVENUE  
City-St-Zip: SANFORD, FL 32771

Title: DST ( ) Delete  
Name: BREEHL, KATHERINE F  
Address: 700 SOUTH PARK AVENUE  
City-St-Zip: SANFORD, FL 32771

Title: DVP ( ) Delete  
Name: HAGUE, PHILLIP A  
Address: 5004 STRAWBRIDGE TERRACE # 202  
City-St-Zip: SANFORD, FL 32771

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DVP (X) Change ( ) Addition  
Name: HAGUE, PHILLIP A  
Address: 4401 FALLING ACORN CIRCLE  
City-St-Zip: LAKE MARY, FL 32746

I hereby certify that the information supplied with this filing does not qualify for the 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: KATHERINE BREEHL

DST

01/30/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date