

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000161279

FILED
Apr 29, 2005
Secretary of State

Entity Name: HAMMERHEAD SIDING OF N. E. FLORIDA, INC.

Current Principal Place of Business:

1888 HUNTERS TRACE CIRCLE
MIDDLEBURG, FL 32268 US

New Principal Place of Business:

1888 HUNTERS TRACE CIRCLE
MIDDLEBURG, FL 32068 US

Current Mailing Address:

1888 HUNTERS TRACE CIRCLE
MIDDLEBURG, FL 32268 US

New Mailing Address:

1888 HUNTERS TRACE CIRCLE
MIDDLEBURG, FL 32068 US

FEI Number: 20-1934457

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CLARK, SHAWN W
1888 HUNTERS TRACE CIRCLE
MIDDLEBURG, FL 32268 US

Name and Address of New Registered Agent:

CLARK, SHAWN W
1888 HUNTERS TRACE CIRCLE
MIDDLEBURG, FL 32068 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: SHAWN W CLARK

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CLARK, SHAWN W
Address: 1888 HUNTERS TRACE CIRCLE
City-St-Zip: MIDDLEBURG, FL 32268 US

Title: VP () Delete
Name: LONG, JEFFERY R
Address: 10850 GOBLE ROAD
City-St-Zip: JACKSONVILLE, FL 32221 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CLARK, SHAWN W
Address: 1888 HUNTERS TRACE CIRCLE
City-St-Zip: MIDDLEBURG, FL 32068 US

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

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: SHAWN W CLARK

P

04/29/2005

Electronic Signature of Signing Officer or Director

Date