## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000029242

Entity Name: CLADDING SYSTEMS MANAGEMENT GROUP, INC.

FILED Feb 18, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4302 HENDERSON BLVD. 3218 EAST 4TH AVENUE TAMPA, FL 33605

TAMPA, FL 336295693

Current Mailing Address: New Mailing Address:

4302 HENDERSON BLVD. 3218 EAST 4TH AVENUE TAMPA, FL 33605

TAMPA, FL 336295693

FEI Number: 20-2384900 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ALEXANDER, ELIZABETH G
4302 HENDERSON BLVD
4702 WEST NEPTUNE STREET
102 TAMPA, FL 336295693 US

ALEXANDER, ELIZABETH G
4702 WEST NEPTUNE STREET
TAMPA, FL 33629 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: 02/18/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition ALEXANDER, ELIZABETH G ALEXANDER, ELIZABETH G Name: Name: 4302 HENDERSON BLVD, STE 102 Address: 4702 WEST NEPTUNE STREET Address: City-St-Zip: TAMPA, FL 336295693 US City-St-Zip: TAMPA, FL 33629 US

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Title: P () Delete Title: VP (X) Change () Addition Name: ALEXANDER, WILLIAM M Name: ALEXANDER, WILLIAM M Address: 4302 W. HENDERSON BLVD., SUITE #102 Address: 4702 WEST NEPTUNE STREET

City-St-Zip: TAMPA, FL 336295693 US City-St-Zip: TAMPA, FL 33629 US

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: ELIZABETH G. ALEXANDER PRES 02/18/2009