

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 14, 2008 08:00 AM
Secretary of State**

DOCUMENT # P05000084421

1. Entity Name
TOP SASH WINDOWS AND DOORS, INC.



Principal Place of Business
**2311 W. LINEBAUGH AVE
TAMPA, FL 33612 US**

Mailing Address
**2311 W. LINEBAUGH AVE
TAMPA, FL 33612 US**



01092008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-2980675

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**PETERSON, KEVIN
2311 W. LINEBAUGH AVE
TAMPA, FL 33612**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Kevin Peterson* *Kevin Peterson*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1-9-2008

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	PETERSON, KEVIN D
STREET ADDRESS	2300 W. LINEBAUGH AVE
CITY-ST-ZIP	TAMPA, FL 33612
TITLE	V
NAME	DANKO, RAY
STREET ADDRESS	2311 W. LINEBAUGH AVE
CITY-ST-ZIP	TAMPA, FL 33612
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000783506
01/16/08-80017-010 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I 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 address, with all other like empowered

SIGNATURE: *Kevin Peterson* *Kevin Peterson*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-9-2008 813-930-7055

Date

Daytime Phone #