

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000106277

FILED  
Jul 26, 2007  
Secretary of State

Entity Name: STORM PANELS UNLIMITED INC.

## Current Principal Place of Business:

1613 S.W. BILTMORE ST.  
PORT ST. LUCIE, FL 34984

## New Principal Place of Business:

1421 S.W. BILTMORE ST.  
PORT ST. LUCIE, FL 34983

## Current Mailing Address:

1613 S. W. BILTMORE ST.  
PORT ST LUCIE, FL 34984

## New Mailing Address:

1421 S. W. BILTMORE ST.  
PORT ST LUCIE, FL 34983

FEI Number: 20-3227519

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FUNCKE, ROLAND  
721 S. W. SOUTH MACEDO BLVD.  
PORT ST. LUCIE, FL 34983 US

## Name and Address of New Registered Agent:

FUNCKE, ROLAND  
1421 S. W. BILTMORE ST.  
PORT ST. LUCIE, FL 34983 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: ROLAND FUNCKE

07/26/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: FUNCKE, ROLAND  
Address: 721 S. W. SOUTH MACEDO BLVD.  
City-St-Zip: PORT ST. LUCIE, FL 34983

Title: TR ( ) Delete  
Name: FUNCKE, ELIZABETH  
Address: 721 S.W. SOUTH MACEDO BLVD.  
City-St-Zip: PORT ST. LUCIE, FL 34983

Title: D ( ) Delete  
Name: FUNCKE, CHRISTOPHER R  
Address: 1613 S. W. BILTMORE ST.  
City-St-Zip: PORT SAINT LUCIE, FL 34984

Title: D (X) Delete  
Name: FELL, LOUIS  
Address: 1613 S.W. BILTMORE ST.  
City-St-Zip: PORT ST. LUCIE, FL 34984

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: FUNCKE, ROLAND  
Address: 1421 S. W. BILTMORE ST.  
City-St-Zip: PORT ST. LUCIE, FL 34983 US

Title: TR (X) Change ( ) Addition  
Name: FUNCKE, ELIZABETH  
Address: 1421 S.W. BILTMORE ST.  
City-St-Zip: PORT ST. LUCIE, FL 34983 US

Title: D (X) Change ( ) Addition  
Name: FELL, LOUIS  
Address: 1421 S.W. BILTMORE ST.  
City-St-Zip: PORT ST. LUCIE, FL 34983 US

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

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: ROLAND FUNCKE

P

07/26/2007

Electronic Signature of Signing Officer or Director

Date