

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000152192

Entity Name: ATLANTIC SIDING COMPANY

FILED
Mar 14, 2008
Secretary of State

Current Principal Place of Business:

6767 HOFFNER ROAD
ORLANDO, FL 328223402

New Principal Place of Business:

Current Mailing Address:

6767 HOFFNER ROAD
ORLANDO, FL 328223402

New Mailing Address:

FEI Number: 27-0133015

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAMBERT, LYNNEN L
724 CAVE HOLLOW LANE
ORLANDO, FL 32828 US

Name and Address of New Registered Agent:

LAMBERT, LYNNEN L
5446 MING DR
ORLANDO, FL 32812 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:

03/14/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: GAGNE, MICHAEL
Address: 6767 HOFFNER ROAD
City-St-Zip: ORLANDO, FL 328223402

Title: DV () Delete
Name: LAMBERT, LYNNEN L
Address: 6767 HOFFNER ROAD
City-St-Zip: ORLANDO, FL 328223402

Title: DT (X) Delete
Name: MEYERS, LARRY J
Address: 6767 HOFFNER ROAD
City-St-Zip: ORLANDO, FL 328223402

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DV (X) Change () Addition
Name: LAMBERT, LYNNEN L
Address: 5446 MING DR
City-St-Zip: ORLANDO, FL 32812

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: LYNNEN L LAMBERT

DV

03/14/2008

Electronic Signature of Signing Officer or Director

Date