

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000156605

FILED
Apr 30, 2007
Secretary of State

Entity Name: PEAKE SCREEN REPAIR, INC.

Current Principal Place of Business:

5171 14TH AVENUE SOUTHWEST
NAPLES, FL 34116 US

New Principal Place of Business:

5171 HAWTHORN WOODS WAY
NAPLES, FL 34116 US

Current Mailing Address:

281 SPIDER LILY LANE
NAPLES, FL 34119 US

New Mailing Address:

5171 HAWTHORN WOODS WAY
NAPLES, FL 33416 US

FEI Number: 76-0807267

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOSEPH, ANGELA G
281 SPIDER LILY LANE
NAPLES, FL 34116 US

Name and Address of New Registered Agent:

PEAKE, L W
5171 HAWTHORN WOODS WAY
NAPLES, FL 34116 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: L W PEAKE

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VSD () Delete
Name: JOSEPH, ANGELA G
Address: 281 SPIDER LILY LANE
City-St-Zip: NAPLES, FL 34119 US

Title: PD () Delete
Name: PEAKE, L.W.
Address: 5171 14TH AVENUE
City-St-Zip: NAPLES, FL 34116 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VSD (X) Change () Addition
Name: PEAKE, L W
Address: 5171 HAWTHORN WOODS WAY
City-St-Zip: NAPLES, FL 34116 US

Title: PD (X) Change () Addition
Name: PEAKE, L. W
Address: 5171 HAWTHORN WOODS WAY
City-St-Zip: NAPLES, FL 34116 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: L W PEAKE

PD

04/30/2007

Electronic Signature of Signing Officer or Director

Date