

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000001575

FILED
Apr 28, 2007
Secretary of State

Entity Name: S & L HOME IMPROVEMENTS INC.

Current Principal Place of Business:

170 LAKE HAMILTON BLVD.
WINTER HAVEN, FL 33881

New Principal Place of Business:

Current Mailing Address:

170 LAKE HAMILTON BLVD.
WINTER HAVEN, FL 33881

New Mailing Address:

FEI Number: 20-4077763

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHOUPPE, ASHLEY M
170 LAKE HAMILTON BLVD.
WINTER HAVEN, FL 33881 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SHOUPPE, ANTHONY F II
Address: 170 LAKE HAMILTON BLVD.
City-St-Zip: WINTER HAVEN, FL 33881

Title: VD () Delete
Name: BISHOP, WILLIAM F
Address: 915 EAGLE AVE.
City-St-Zip: EAGLE LAKE, FL 33839

Title: TD (X) Delete
Name: BRIGANTE, MAUREEN
Address: 529 COLEMAN DR. WEST
City-St-Zip: WINTER HAVEN, FL 33884

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: SHOUPPE, ASHLEY M
Address: 170 LAKE HAMILTON BLVD.
City-St-Zip: WINTER HAVEN, FL 33881

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: ANTHONY F. SHOUPPE

PD

04/28/2007

Electronic Signature of Signing Officer or Director

Date