

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000038109

FILED  
Jan 31, 2007  
Secretary of State

**Entity Name:** ARCHITECTURAL WOOD PRODUCTS OF COLLIER COUNTY, INC.

**Current Principal Place of Business:**

2154 J&C BOULEVARD  
NAPLES, FL 34117

**New Principal Place of Business:**

2154 J&C BOULEVARD  
NAPLES, FL 34109

**Current Mailing Address:**

2154 J&C BOULEVARD  
NAPLES, FL 34117

**New Mailing Address:**

2154 J&C BOULEVARD  
NAPLES, FL 34109

**FEI Number:** 20-4509496

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JONES, AARON W  
3600 3RD AVENUE SW  
NAPLES, FL FL 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: P ( ) Delete  
Name: JONES, AARON W  
Address: 3600 3RD AVENUE SW  
City-St-Zip: NAPLES, FL 34117

Title: V ( ) Delete  
Name: JONES, MICHELLE A  
Address: 3600 3RD AVENUE SW  
City-St-Zip: NAPLES, FL 34117

Title: T ( ) Delete  
Name: JONES, WAYNE  
Address: 3600 3RD AVENUE SW  
City-St-Zip: NAPLES, FL 34117

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: T (X) Change ( ) Addition  
Name: JONES, WAYNE  
Address: 2581 8TH STREET NW  
City-St-Zip: NAPLES, FL 34120

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHELLE A. JONES

VP

01/31/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date