2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000145265

Entity Name: FLORIDA WINDOW MASTER & SIDING, INC.

FILED Aug 01, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

752 AUTUMNCREST DR 752 AUTUMNCREST DR SARASOTA, FL 34232 SARASOTA, FL 34232-248

Current Mailing Address: New Mailing Address:

752 AUTUMNCREST DR 752 AUTUMNCREST DRIVE SARASOTA, FL 34232 SARASOTA, FL 34232

FEI Number: 61-1535093 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HINLOOPEN LABBERTON, KAREL J
752 AUTUMNCREST DR
SARASOTA, FL 34232 US
HINLOOPEN LABBERTON, KAREL J
752 AUTUMNCREST DRIVE
SARASOTA, FL 34232 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: KAREL VAN HINLOOPEN LABBERTON 08/01/2008

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: DP (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 DP () Delete
 Title:
 DP (X) Change () Addition

 Name:
 RIJKE, MARYNIA
 Name:
 RIJKE, MARYNIA

 Address:
 752 AUTUMNCREST DR
 Address:
 752 AUTUMNCREST DR

 City-St-Zip:
 SARASOTA, FL 34232
 City-St-Zip:
 SARASOTA, FL 34232 US

Title: DV () Delete Title: DV (X) Change () Addition Name: HINLOOPEN LABBERTON, KAREL J Name: HINLOOPEN LABBERTON, KAREL J

Address: 752 AUTUMNCREST DR Address: 752 AUTUMNCREST DR City-St-Zip: SARASOTA, FL 34232 City-St-Zip: SARASOTA, FL 34232 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: KAREL VAN HINLOOPEN LABBERTON DV 08/01/2008