

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000013626

Entity Name: MYAKKA DOOR INC

FILED  
Apr 26, 2011  
Secretary of State

**Current Principal Place of Business:**

42150 STATE RD. 64 EAST  
MYAKKA CITY, FL 342517353

**New Principal Place of Business:**

**Current Mailing Address:**

42150 STATE RD. 64 EAST  
MYAKKA CITY, FL 342517353

**New Mailing Address:**

FEI Number: 26-1787035

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SNYDER, CHARLES G  
42150 STATE RD. 64 EAST  
MYAKKA CITY, FL 342517353 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SNYDER, CATHERINE  
Address: 42150 STATE RD. 64 EAST  
City-St-Zip: MYAKKA CITY, FL 342517353

Title: VD  
Name: SNYDER, CHARLES G  
Address: 42150 STATE RD. 64 EAST  
City-St-Zip: MYAKKA CITY, FL 342517353

Title: DT  
Name: SNYDER, GARRET  
Address: 42150 STATE RD. 64 EAST  
City-St-Zip: MYAKKA CITY, FL 342517353

Title: DS  
Name: WALKER, RACHAEL  
Address: 42150 STATE RD. 64 EAST  
City-St-Zip: MYAKKA CITY, FL 342517353

I hereby 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 all other like empowered.

SIGNATURE: RACHEL WALKER

DS

04/26/2011

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

\_\_\_\_\_  
Date