

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000014430

FILED
Apr 27, 2005
Secretary of State

Entity Name: ALL SEASONS REMODELING CENTER, INC.

Current Principal Place of Business:

309 RUBERIA AVENUE
PENSACOLA, FL 32507 US

New Principal Place of Business:

Current Mailing Address:

309 RUBERIA AVENUE
PENSACOLA, FL 32507 US

New Mailing Address:

FEI Number: 59-3159166 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NOTZ, KARL I.
309 RUBERIA AVENUE
PENSACOLA, FL 32507 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: NOTZ, KARL I.
Address: 309 RUBERIA AVENUE
City-St-Zip: PENSACOLA, FL 32507

Title: VP () Delete
Name: FULGHUM, WILLIAM
Address: 913 ROCK CREEK AVE
City-St-Zip: PENSACOLA, FL 32505

Title: S () Delete
Name: WEBB, CHRIS
Address: 3615 NORTH 12TH AVE.
City-St-Zip: PENSACOLA, FL 32503

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KARL NOTZ

PD

04/27/2005

Electronic Signature of Signing Officer or Director

Date