

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000058752

FILED  
Mar 20, 2009  
Secretary of State

Entity Name: AMERICAN SHUTTER PRODUCTS, INC.

## Current Principal Place of Business:

6360 TOPAZ COURT  
FORT MYERS, FL 33966 US

## New Principal Place of Business:

11600 ADELMO LANE  
FORT MYERS, FL 33966 US

## Current Mailing Address:

6360 TOPAZ COURT  
FORT MYERS, FL 33966 US

## New Mailing Address:

11600 ADELMO LANE  
FORT MYERS, FL 33966 US

FEI Number: 59-3203735

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DAVIES, CHRISTOPHER N  
2375 TAMiami TR S  
STE 308  
NAPLES, FL 34103 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: CROCI, CESARE  
Address: 6360 TOPAZ CT  
City-St-Zip: FORT MYERS, FL 33966

Title: S ( ) Delete  
Name: CROCI, VITTORIO  
Address: VIA EMILIA 732  
City-St-Zip: BERTINORO (FC) ITALY, 47032

Title: EVP ( ) Delete  
Name: MORZANIGA, GIL  
Address: 6360 TOPAZ COURT  
City-St-Zip: FORT MYERS, FL 33966

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CROCI, CESARE  
Address: 11600 ADELMO LANE  
City-St-Zip: FORT MYERS, FL 33966

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

Title: EVP (X) Change ( ) Addition  
Name: MORZANIGA, GIL  
Address: 11600 ADELMO LANE  
City-St-Zip: FORT MYERS, FL 33966

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: GIL MORZANIGA

EVP

03/20/2009

Electronic Signature of Signing Officer or Director

Date