


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 09, 2007 08:00 A
Secretary of State

DOCUMENT # P93000070929

1. Entity Name
 COMMERCIAL AND RESIDENTIAL DOORS, INC.



Principal Place of Business 2875 46TH AVENUE NORTH ST. PETERSBURG, FL 33714 US	Mailing Address 2875 46TH AVENUE NORTH ST. PETERSBURG, FL 33714 US
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05072007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3205460	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TICKTIN, STANLEY P
 2875 46TH AVENUE NORTH
 ST. PETERSBURG, FL 33714

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP TICKTIN, STANLEY P 6243 VISTA VERDE DRIVE WEST GULFPORT, FL 33707
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TICKTIN, SHEILA 6243 VISTA VERDE DRIVE WEST GULFPORT, FL 33707
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 05/23/07-80036-011 158.75

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Stanley P. Ticktin Date: 5/7/07 Daytime Phone #: 727-545-4342

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR