# 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED**
**Aug 15, 2006**
**Secretary of State**

DOCUMENT# P94000000630

**Entity Name:** THE VILLAGE WINDOW, INC.

**Current Principal Place of Business:**

850 S. MAIN
WILDWOOD, FL 34785

**New Principal Place of Business:**

**Current Mailing Address:**

850 S. MAIN
WILDWOOD, FL 34785

**New Mailing Address:**

**FEI Number: 59-3216180** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

HEARNS, ELDENE L
1596 BLACK LAKE DRIVE
THE VILLAGES, FL 32162 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: P ( ) Delete
Name: HEARNS, ELDENE L
Address: 1596 BLACK LAKE DRIVE
City-St-Zip: THE VILLAGES, FL 32162

Title: ST ( ) Delete
Name: CARY, DAWN A
Address: 10145 CR 117
City-St-Zip: OXFORD, FL 34484

Title: VP ( ) Delete
Name: CARY, WILLIAM C
Address: 10145 CR 117
City-St-Zip: OXFORD, FL 34484

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition
Name: HUGHES, ANN
Address: 5280 CR 125
City-St-Zip: WILDWOOD, FL 34785-791

Title: ST (X) Change ( ) Addition
Name: HEARNS, ELDENE L
Address: 1596 BLACK LAKE DRIVE
City-St-Zip: THE VILLAGES, FL 32162

Title: VP (X) Change ( ) Addition
Name: HEARNS, DARREN A
Address: 1868 SE 85TH STREET ROAD
City-St-Zip: OCALA, FL 34480

I hereby certify that the information supplied with this filing does not qualify for the 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: ELDENE L. HEARNS ST 08/15/2006

Electronic Signature of Signing Officer or Director Date