2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P9400000630

Name:

Address:

City-St-Zip:

HEARNS, DARREN A

OCALA, FL 34480

1868 SE 85TH STREET ROAD

FILED Mar 05, 2007 Secretary of State

Entity Nai	me: THE VIL	LAGE WINDOW, INC.					
Current P	rincipal Plac	e of Business:	New Prin	New Principal Place of Business:			
850 S. MA WILDWO	IN DD, FL 34785						
Current Mailing Address:			New Mail	New Mailing Address:			
850 S. MA WILDWO	IN DD, FL 34785						
FEI Number	: 59-3216180	FEI Number Applied For ()	FEI Number Not App	olicable ()	Certificate of Status Desir	red ()	
Name and	Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
1596 BLAC	ELDENE L CK LAKE DRI ^N AGES, FL 321						
	named entity e of Florida.	submits this statement for the	purpose of changing	its registered	office or registered agent	; or both,	
SIGNATUI	RE:						
	Electro	nic Signature of Registered A	gent		Date		
Election Car	mpaign Financir	ng Trust Fund Contribution ().					
OFFICER	S AND DIREC	CTORS:	ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P (HUGHES, ANN 5280 CR 125 WILDWOOD,		Title: Name: Address: City-St-Zip:	P (. HEARNS, ELI 1596 BLACK THE VILLAGE	LAKE DRIVE		
Title: Name: Address: City-St-Zip:	ST (HEARNS, ELD 1596 BLACK I THE VILLAGE	AKE DRIVE	Title: Name: Address: City-St-Zip:	CARY, DAWN 10145 CR 113	7		
Title:	VP ()	() Delete	Title:	() Change () Addition		

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.

Name:

Address:

City-St-Zip:

SIGNATURE: DAWN A. CARY VPST 03/05/2007