

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000048925

Entity Name: SMM SOFFIT & SIDING, INC.

FILED
Jan 25, 2005
Secretary of State

Current Principal Place of Business:

228 MYRTLE AVENUE NORTH
JACKSONVILLE, FL 32204 US

New Principal Place of Business:

Current Mailing Address:

228 MYRTLE AVENUE NORTH
JACKSONVILLE, FL 32204 US

New Mailing Address:

FEI Number: 59-3317736

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GIBSON, DONALD F
1444 TINTERN LANE
ST. AUGUSTINE, FL 32092 US

Name and Address of New Registered Agent:

GIBSON, DONALD F
179 WATER OAK DRIVE
PONTE VEDRA BEACH, FL 32082 US

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: TAMMY GIBSON

01/25/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: COB () Delete
Name: RICHARDSON, DANNY L
Address: 1580 PALM AVE
City-St-Zip: JACKSONVILLE, FL 32207

Title: P () Delete
Name: GIBSON, DONALD F
Address: 1444 TINTERN LANE
City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: VP () Delete
Name: RICHARDSON, CHARLES T
Address: 13105 RIVERGATE LANE
City-St-Zip: JACKSONVILLE, FL 32223

Title: VP () Delete
Name: GIBSON, TAMMY
Address: 1444 TINTERN LANE
City-St-Zip: SAINT AUGUSTINE, FL 32092

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: GIBSON, DONALD F
Address: 179 WATER OAK DRIVE
City-St-Zip: PONTE VEDRA, FL 32082

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

Title: VP (X) Change () Addition
Name: GIBSON, TAMMY
Address: 179 WATER OAK DRIVE
City-St-Zip: PONTE VEDRA, FL 32082

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: TAMMY GIBSON

VP

01/25/2005

Electronic Signature of Signing Officer or Director

Date