

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000059000

FILED
Apr 09, 2004
Secretary of State

Entity Name: SOUTHEASTERN VINYL SIDING, INC.

Current Principal Place of Business:

3448 LOUVINIA DR
TALLAHASSEE, FL 32345 US

New Principal Place of Business:

1695 METROPOLITAN CIRCLE
SUITE 3
TALLAHASSEE, FL 32308 US

Current Mailing Address:

3448 LOUVINIA DR
TALLAHASSEE, FL 32345 US

New Mailing Address:

1695 METROPOLITAN CIRCLE
SUITE 3
TALLAHASSEE, FL 32308 US

FEI Number: 59-3325964

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EVANS, JOHN
3448 LOUVINIA DR
TALLAHASSEE, FL 32311 US

Name and Address of New Registered Agent:

EVANS, JOHN
1560 SPRING HOLLOW DR.
MONTICELLO, FL 32344 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: JOHN EVANS

04/09/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: EVANS, JOHN
Address: P.O. BOX 128
City-St-Zip: MONTICELLO, FL 32345

Title: V () Delete
Name: EVANS, JUSTIN
Address: 3448 LOUVINIA DRIVE
City-St-Zip: TALLAHASSEE, FL 32311

Title: S () Delete
Name: RUTHERFORD, JACQUELINE
Address: 166 SAMUEL LANE
City-St-Zip: MONTICELLO, FL 32344

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: JUSTIN EVANS

V

04/09/2004

Electronic Signature of Signing Officer or Director

Date