2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2005 08:00 A
Secretary of State

DOCUMENT # P97000010927

1. Entity Name
COMMERCIAL INSTALLATION SYSTEMS, INC.

Principal Place of Business	Mailing Address
6175 WOODROW WILSON BLVD. N.E. ST. PETERSBURG, FL 33703	6175 WOODROW WILSON BLVD. N.E. ST. PETERSBURG, FL 33703

DO NOT WRITE IN THIS SPACE

02072005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3420700
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ROUNTREEE, MICHAEL J
6175 WOODROW WILSON BLVD NE
SAINT PETERSBURG, FL 33703

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	ROUNTREE, MICHAEL J
STREET ADDRESS	6175 WOODROW WILSON BLVD. N.E.
CITY-ST-ZIP	ST. PETERSBURG, FL 33703
TITLE	S
NAME	ROUNTREE, NORA F
STREET ADDRESS	6175 WOODROW WILSON BLVD. N.E.
CITY-ST-ZIP	ST. PETERSBURG, FL 33703
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the info... 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 d... 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 Blo... changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Nora Rountree 3/7/05 727-525-237
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #