

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000014393

Entity Name: A&S ICF WALL SYSTEMS, INC.

FILED
Apr 07, 2005
Secretary of State

Current Principal Place of Business:

2341 CANAL DRIVE
NICEVILLE, FL 32578

New Principal Place of Business:

Current Mailing Address:

2341 CANAL DRIVE
NICEVILLE, FL 32578

New Mailing Address:

FEI Number: 59-3418611

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAYEW, WALTER L
2341 CANAL DRIVE
NICEVILLE, FL 32578 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SUMMERS, PHIL
Address: 1150 LA ORANGE RD
City-St-Zip: FREEPORT, FL 32439

Title: V () Delete
Name: SUMMERS, PHIL
Address: 1150 LA GRANGE RD
City-St-Zip: FREEPORT, FL 32439

Title: S () Delete
Name: MAYEW, ARDATHO
Address: 2341 CANAL DRIVE
City-St-Zip: NICEVILLE, FL 32578

Title: VP () Delete
Name: MAYEW, STEVEN A
Address: 1629 YALPARAISO BLVD
City-St-Zip: NICEVILLE, FL 32578

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:

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: PHIL SUMMERS

P

04/07/2005

Electronic Signature of Signing Officer or Director

Date