

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000069432

FILED
Mar 17, 2007
Secretary of State

Entity Name: AA ACTION DOOR REPAIR, INC.

Current Principal Place of Business:

P O BOX 92404
LAKELAND, FL 33804

New Principal Place of Business:

1002 HIDDEN CT.
LAKELAND, FL 33809

Current Mailing Address:

P O BOX 92404
LAKELAND, FL 33804

New Mailing Address:

FEI Number: 59-3470444 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GALISPEAU, CLAUDE D
1002 HIDDEN CT
LAKELAND, FL 33809 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: D () Delete
Name: GALISPEAU, CLAUDE D
Address: 1002 HIDDEN CT
City-St-Zip: LAKELAND, FL 33809

Title: D () Delete
Name: GALISPEAU, LYNETTE S
Address: 1002 HIDDEN CT
City-St-Zip: LAKELAND, FL 33809

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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.

SIGNATURE: LYNETTE GALISPEAU

Electronic Signature of Signing Officer or Director

OWNE

03/17/2007

Date