2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000081355

613 GRANADA AVE

VENICE, FL 34285 US

Address:

City-St-Zip:

Entity Name: HERITAGE SHOWER DOORS, INC

FILED Jan 18, 2007 Secretary of State

Entity Nan	ne: HEKII	AGE SHOWER DOORS, INC				
Current Principal Place of Business:			New Princi	New Principal Place of Business:		
504 E VEN VENICE, F		US	1200 OGDE VENICE, FL		US	
Current M	ailing Add	lress:	New Mailin	New Mailing Address:		
504 E VEN VENICE, F		US	1200 OGDE VENICE, FL		US	
FEI Number:	65-0782407	FEI Number Applied For ()	FEI Number Not Applic	able ()	Certificate of Status Desired ()	
Name and	Address o	of Current Registered Agent:	Name and A	Name and Address of New Registered Agent:		
MOGFORE 613 GRAN VENICE, F	ÁDA AVEN	DCJR IUE US				
The above in the State	named ent of Florida.	ity submits this statement for th	ne purpose of changing its	s registere	d office or registered agent, or both,	
SIGNATUR	RE:					
	Elec	tronic Signature of Registered.	Agent		Date	
Election Can	npaign Finan	cing Trust Fund Contribution ().				
OFFICERS	AND DIR	ECTORS:	ADDITIONS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	613 GRANA	() Delete , EDMUND C JR ADA AVENUE _ 34285 US	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	205 W THE	() Delete , EDMUND C III : CORSO _ 34285 US	Title: Name: Address: City-St-Zip:	,	(X) Change () Addition EDMUND C III ENTO STREET . 34285 US	
Title: Name: Address: City-St-Zip:	332 SHORE	()Delete , MARTIN S E RD. _ 34285 US	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name:	SD MOGFORD	()Delete :ERIN L	Title: Name:	SD PREECE. E	(X) Change()Addition RIN L	

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.

Address:

City-St-Zip:

SIGNATURE: ERIN PREECE SD 01/18/2007

2192 MESIC HAMMOCK WAY

VENICE, FL 34292 US