2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000081355

Entity Name: HERITAGE SHOWER DOORS, INC.

FILED Mar 16, 2009 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
1200 OGDEN ROAD		1200 OGDEN ROAL)		
VENICE, I	FL 34285 U	S	5 VENICE EL 24205	US	
			VENICE, FL 34285	03	
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
	DEN ROAD	_	1200 OGDEN ROAD)	
VENICE, I	FL 34285 U	S	5 VENICE, FL 34285	US	
EEI Number	r: 65-0782407	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
r El Mallibei	1. 03-0702407	rendifiber Applied For ()	r El Nullibel Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:	
613 GRAN VENICE, I	RD, EDMUND C NADA AVENUE FL 34285 U	: S			
	e named entity s te of Florida.	submits this statement for the p	ourpose of changing its registe	red office or registered agent, or both	
SIGNATU	IRE:				
	Electror	ic Signature of Registered Age	ent	Date	
Election Ca	ımpaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	
Title: Name: Address: City-St-Zip:	PD () MOGFORD, ED 613 GRANADA VENICE, FL 34	AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () MOGFORD, ED 621 GRANADA VENICE, FL 34	AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD () MOGFORD, MA 332 SHORE RE VENICE, FL 34).	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () PREECE, ERIN 2192 MESIC H/ VENICE, FL 34	AMMOCK WAY		(X) Change () Addition , ERIN M SIC HAMMOCK WAY FL 34292 US	

I hereby certify that the information supplied with this filing does not qualify 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: ERIN PREECE SD 03/16/2009