

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000105014

FILED  
Mar 04, 2009  
Secretary of State

Entity Name: SURFSIDE ALUMINIUM & SCREENS, INC.

## Current Principal Place of Business:

621 SW BILTMORE ST  
PORT SAINT LUCIE, FL 34983

## New Principal Place of Business:

## Current Mailing Address:

265 SOUTHWEST PORT ST. LUCIE BLVD. #119  
PORT SAINT LUCIE, FL 34984

## New Mailing Address:

882 ROCKWOOD LANE  
TRYON, NC 28782

FEI Number: 65-0802781

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NAGLE, DENNIS A  
621 SW BILTMORE ST  
PORT SAINT LUCIE, FL 34983 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: PTD ( ) Delete  
Name: NAGLE, DENNIS A  
Address: 265 SOUTHWEST PORT ST. LUCIE BLVD. #119  
City-St-Zip: PORT SAINT LUCIE, FL 34984

Title: VD ( ) Delete  
Name: NAGLE, DENNIS C  
Address: 265 SW PORT ST LUCIE BLVD # 119  
City-St-Zip: PORT SAINT LUCIE, FL 34984

Title: SD (X) Delete  
Name: NAGLE, ANNE E  
Address: 265 SW PORT ST LUCIE BLVD # 119  
City-St-Zip: PORT SAINT LUCIE, FL 34984

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VD (X) Change ( ) Addition  
Name: NAGLE, ANNE E  
Address: 265 SW PORT ST LUCIE BLVD # 119  
City-St-Zip: PORT SAINT LUCIE, FL 34984

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ANNE NAGLE

VP

03/04/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date