

## 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000100961

1. Entity Name  
A-1 GARAGE DOORS, INC.Principal Place of Business  
11121 105TH AVE NORTH  
SEMINOLE FL 33778  
USMailing Address  
A-1 GARAGE DOORS  
11121 105TH AVE NORTH  
SEMINOLE FL  
US

2. Principal Place of Business

11121 105<sup>th</sup> AVE NORTH

Suite, Apt. #, etc.

3. Mailing Address

11121 105<sup>th</sup> AVE NORTH

Suite, Apt. #, etc.

City &amp; State

SEMINOLE FLORIDA

City &amp; State

SEMINOLE FLORIDA

Zip  
33778Country  
USZip  
33778Country  
US

4. FEI Number

59-3556105

Applied For

Not Applicable

5. Certificate of Status Desired

 \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

TALKINGTON, HEIDI  
11121 105TH AVE NORTH  
SEMINOLE FL 33778

7. Name and Address of New Registered Agent

Name  
HEIDI TALKINGTON  
Street Address (P.O. Box Number is Not Acceptable)  
11121 105<sup>th</sup> AVE NORTHCity  
SEMINOLE FL Zip Code  
33778

8. 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

Heidi TALKINGTON Heidi TALKINGTON "President"

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating.)

4/12/01

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) FILE NOW!!! FEE IS \$150.00  
After MAY 1, 2001 Fee will be \$550.00  
Make Check Payable to Department of State10. Election Campaign Financing  
Trust Fund Contribution.  \$5.00 May Be  
Added to Fees.

## 11. OFFICERS AND DIRECTORS

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT TALKINGTON, HEIDI 11121 105TH AVE NORTH LARGO FL 33778	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD TALKINGTON, HARRY 11121 105 AVE NORTH LARGO FL 33778	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Barry D. Miller Harry TALKINGTON Secretary* 4/12/01 319-8648  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Daytime Phone #

CR2E034 (10/00)

0375454