

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000015853

Entity Name: D & R SHUTTERS, INC.

FILED
May 06, 2004
Secretary of State

Current Principal Place of Business:

2375 ST JOHNS BLUFF RD
STE 301
JACKSONVILLE, FL 32246

New Principal Place of Business:

Current Mailing Address:

RT. 1 BOX 75 T
RIDGELAND, SC 29936

New Mailing Address:

5851 LOWCOUNTRY DRIVE
RIDGELAND, SC 29936

FEI Number: 59-3559605

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RYAN, SUZANNE
6654-68TH ST. N
PINELLAS PARK, FL 33781

Name and Address of New Registered Agent:

COLSON, SUZANNE
6654-68TH ST. N
PINELLAS PARK, FL 33781

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: SUZANNE COLSON

05/06/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RYAN, BARBARA A
Address: RT. 1 BOX 75 T
City-St-Zip: RIDGELAND, SC 29936

Title: VD () Delete
Name: RYAN, ROBERT W
Address: RT. 1 BOX 75T
City-St-Zip: RIDGELAND, SC 29936

Title: STD () Delete
Name: RYAN, SUZANNE B
Address: 6654-68TH ST.
City-St-Zip: PINELLAS PARK, FL 33781

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RYAN, BARBARA A
Address: 5851 LOWCOUNTRY DRIVE
City-St-Zip: RIDGELAND, SC 29936

Title: VD (X) Change () Addition
Name: RYAN, ROBERT W
Address: 5851 LOWCOUNTRY DRIVE
City-St-Zip: RIDGELAND, SC 29936

Title: STD (X) Change () Addition
Name: COLSON, SUZANNE B
Address: 6654-68TH ST.
City-St-Zip: PINELLAS PARK, FL 33781

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BARBARA A RYAN

PRES

05/06/2004

Electronic Signature of Signing Officer or Director

Date