

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000047781

FILED
May 18, 2005
Secretary of State

Entity Name: TOUCHTON INSULATION AND WINDOWS, INC.

Current Principal Place of Business:

9397 132ND TERRACE
LIVE OAK, FL 32060

New Principal Place of Business:

Current Mailing Address:

9397 132ND TERRACE
LIVE OAK, FL 32060

New Mailing Address:

FEI Number: 59-3580246

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIVIK, KENNETH
9397 132ND TERRACE
LIVE OAK, FL 32060 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

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: D () Delete
Name: SIVIK, KENNETH
Address: 9397 132ND TERRACE
City-St-Zip: LIVE OAK, FL 32060

Title: D () Delete
Name: SIVIK, CHRISTINA
Address: 9397 132ND TERRACE
City-St-Zip: LIVE OAK, FL 32060

Title: D () Delete
Name: SIVIK, WILLIAM
Address: 9507- 132 TERRACE
City-St-Zip: LIVE OAK, FL 32060

Title: D () Delete
Name: SIVIK, CAROL
Address: 9507 132ND TERRACE
City-St-Zip: LIVE OAK, FL 32060

Title: VP () Delete
Name: DORMAN, ANTHONY
Address: 12432 85TH ROAD
City-St-Zip: LIVE OAK, FL 32060

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: D (X) Change () Addition
Name: GUENTHER, JUSTIN P
Address: 11943 CR 132
City-St-Zip: LIVE OAK, FL 32060

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: KENNETH SIVIK

PRES

05/18/2005

Electronic Signature of Signing Officer or Director

Date