

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S25109

Entity Name: TWIN WINDOWS CORP.

FILED
Feb 15, 2006
Secretary of State

Current Principal Place of Business:

1401A RAILHEAD BLVD
NAPLES, FL 34110 US

New Principal Place of Business:

Current Mailing Address:

C/O M J BODAH CPA 2443 PINE WOOD CIRCLE
NAPLES, FL 34105 US

New Mailing Address:

FEI Number: 52-1717660

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BODAH, MICHAEL J CPA
2443 PINE WOOD CIRCLE
NAPLES, FL 34105 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: VTS () Delete
Name: REPAR, LAWRENCE
Address: 1401A RAILHEAD BLVD
City-St-Zip: NAPLES, FL 34110 US

Title: PD () Delete
Name: MURPHY, BRIAN
Address: 1401A RAILHEAD BLVD
City-St-Zip: NAPLES, FL 34110 US

Title: DVP () Delete
Name: WOOLNOUGH, MARK
Address: 1401A RAILHEAD BLVD
City-St-Zip: NAPLES, FL 34110 US

Title: V () Delete
Name: NOBLE, ED
Address: 1401A RAILHEAD BLVD
City-St-Zip: NAPLES, FL 34110 US

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: BRIAN MURPHY

PRES

02/15/2006

Electronic Signature of Signing Officer or Director

Date