

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S74889

FILED  
Mar 04, 2005  
Secretary of State

Entity Name: EXTERIOR SUPPLY OF JACKSONVILLE, INC.

## Current Principal Place of Business:

600 KING STREET  
JACKSONVILLE, FL 32204 US

## New Principal Place of Business:

## Current Mailing Address:

2460 HWY 72 221 EAST  
GREENWOOD, SC 29649 US

## New Mailing Address:

FEI Number: 59-3060403      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SLAUGHTER, JIM R  
600 KING STREET  
JACKSONVILLE, FL 32204 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: DP ( ) Delete  
Name: EMILY, MICHAEL L  
Address: 276 ST JOHN'S GOLF DRIVE  
City-St-Zip: ST AUGUSTINE, FL 32092 US

Title: ST ( ) Delete  
Name: HENDRICK, MICHELE E  
Address: 504 S. CAMBRIDGE ST.  
City-St-Zip: NINETY SIX, SC 29666 US

Title: V ( ) Delete  
Name: HENDRICK, THOMAS N  
Address: 504 S CAMBRIDGE ST  
City-St-Zip: NINETY-SIX, SC 29666 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: EMILY, MICHAEL L  
Address: 103 LAKE JULIA DRIVE N  
City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

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 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: THOMAS N HENDRICK

V

03/04/2005

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

\_\_\_\_\_  
Date