2006 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

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SIGNATURE: 🛆

Aug 08, 2006 8:00 am Secretary of State DOCUMENT # V62432 08-08-2006 90003 014 ***150.00 A-A SPEEDY OPENERS, INC. Principal Place of Business Mailing Address 496 ESTHER LANE ALTAMONTE SPRINGS FL 32714 496 ESTHER LANE **ALTAMONTE SPRINGS FL 32714** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc. 2nd MOORE CR2E034 (4/06) City & State City & State 4. FEI Number Applied For 59-3135398 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SHATTUCK, DORIS G 2325 SWEETWATER COUNTRY CLUB X Street Address (P.O. Box Number is Not Acceptable) APOPKA FL 32712 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstaling) DATE FILE NOW!!! FEE IS \$550.00 S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 9. Election Campaign Financing \$5.00 May Be DUE BY September 6, 2006 late fee. By checking this box, the corporation certifies it did Added to Fees Trust Fund Contribution. Make Check Payable to Florida Department of State not receive prior notice. Fee to file is \$150.00. OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete Change ☐ Addition SHATTUCK, DORIS G NAME 2325 SWEETWATER COUNTRY CLUB D STREET ADDRESS STREET ADDRESS APOPKA FL 32712 CITY-ST-ZIP C11Y - ST - 20P TITLE Delete TITLE Change ☐ Addition WRIGHT, STEVE NAME NAME 4149 LAUGHLIN ROAD STREET ADDRESS STREET ADDRESS ZELLWOOD FL 32798 CITY-ST-ZIP CITY - ST - ZIP THE ☐ Delete ☐ Change Addition REID, ROBERT NAME NAME 7602 S.W. 50TH ROAD STREET ADDRESS STREET ADDRESS GAINESVILLE FL 32608 CITY-ST-ZIF CITY-ST-ZIE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED

8-3-06 407-464-1037
Date Daylerie Phone #

8-3-06 This regart was never received. I have always sent this back W/filing fees