

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V69101

**Entity Name:** ACE DOOR & WINDOW SERVICE, INC.**Current Principal Place of Business:**9123 HARE AVE  
JACKSONVILLE, FL 32211**Current Mailing Address:**9123 HARE AVE  
JACKSONVILLE, FL 32211 US**FEI Number:** 59-3142728**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HALE, VICTOR A  
9123 HARE AVENUE  
JACKSONVILLE, FL 32211 US*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**Officer/Director Detail :**

Title EXECUTIVE VICE PRESIDENT  
Name HALE, GARY S  
Address 9123 HARE AVE  
City-State-Zip: JACKSONVILLE FL 32211

Title PRESIDENT  
Name HALE, VICTOR A  
Address 9123 HARE AVE  
City-State-Zip: JACKSONVILLE FL 32211

Title SECRETARY  
Name HALE, NICOLE M  
Address 9123 HARE AVE  
City-State-Zip: JACKSONVILLE FL 32211

Title TREASURER  
Name NICOLE, HALE M  
Address 9123 HARE AVE  
City-State-Zip: JACKSONVILLE FL 32211

Title VP  
Name GORDON, HALE N  
Address 9123 HARE AVE  
City-State-Zip: JACKSONVILLE FL 32211

*I hereby 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 all other like empowered.*

**SIGNATURE:** VICTOR HALE

P.

01/29/2020

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date