

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V69101

Entity Name: ACE DOOR & WINDOW SERVICE, INC.**Current Principal Place of Business:**2220 CORPORATE SQUARE BLVD
JACKSONVILLE, FL 32216**Current Mailing Address:**2220 CORPORATE SQUARE BLVD
JACKSONVILLE, FL 32216 US**FEI Number:** 59-3142728**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HALE, VICTOR A
2220 CORPORATE SQUARE BLVD
JACKSONVILLE, FL 32216 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	2220 CORPORATE SQUARE BLVD
City-State-Zip:	JACKSONVILLE FL 32216

Title	PRESIDENT
Name	HALE, VICTOR A
Address	2220 CORPORATE SQUARE BLVD
City-State-Zip:	JACKSONVILLE FL 32216

Title	SECRETARY
Name	HALE, NICOLE M
Address	2220 CORPORATE SQUARE BLVD
City-State-Zip:	JACKSONVILLE FL 32216

Title	TREASURER
Name	NICOLE, HALE M
Address	2220 CORPORATE SQUARE BLVD
City-State-Zip:	JACKSONVILLE FL 32216

Title	VP
Name	GORDON, HALE N
Address	2220 CORPORATE SQUARE BLVD
City-State-Zip:	JACKSONVILLE FL 32216

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**PRESIDENT****02/04/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date