## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# L40932

FILED Jan 17, 2007 Secretary of State

Entity Name: AWS CARPENTER CONTRACTORS, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	BAR AVENUE R, FL 34677			
Current Mailing Address:		New Mailing Address:		
BOX 551 OLDSMAF	R, FL 34677			
FEI Number	r: 59-2985326	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	d Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:
SUITE F				
The above in the Stat	e of Florida. RE:	submits this statement for the p		ed office or registered agent, or both,
The above in the Stat SIGNATU	e named entity e of Florida. RE: Electro			ed office or registered agent, or both,  Date
The above in the Stat SIGNATU Election Ca	e named entity e of Florida. RE: Electro	submits this statement for the ponic Signature of Registered Ageing Trust Fund Contribution ( ).	nt	
The above in the Stat SIGNATU Election Ca	e named entity e of Florida.  RE: Electro mpaign Financii S AND DIREC	submits this statement for the point Signature of Registered Ageing Trust Fund Contribution ( ).  CTORS:  ) Delete , ARNOLD W ROAD SOUTH	nt	Date
The above in the Stat SIGNATU  Election Ca  OFFICER  Title:  Name:  Address:	e named entity e of Florida.  RE:  Electro  mpaign Financir  S AND DIRECT SD ( SCHROEDER 3377 BRIAN R PALM HARBO  PD ( CHRISTY, RA'	submits this statement for the points Signature of Registered Ageing Trust Fund Contribution ( ).  CTORS:  ) Delete , ARNOLD W ROAD SOUTH R, FL  ) Delete YMOND D DN SPRINGS ROAD	nt  ADDITIONS/CHANG  Title: Name: Address:	Date  ES TO OFFICERS AND DIRECTORS

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: RAYMOND D CHRISTY PD 01/17/2007