

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000131961

Entity Name: BLUE SKY HOME IMPROVEMENTS, INC.

FILED
May 24, 2006
Secretary of State

Current Principal Place of Business:

269 SHADYDALE CT
DELTONA, FL 32738

New Principal Place of Business:

115 ST. JUDE LANE
OSTEEN, FL 32764

Current Mailing Address:

269 SHADYDALE CT
DELTONA, FL 32738

New Mailing Address:

115 ST. JUDE LANE
OSTEEN, FL 32764

FEI Number: 20-0393103

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POULIN, PATRICIA H
269 SHADYDALE CT
DELTONA, FL 32738 US

Name and Address of New Registered Agent:

POULIN, PATRICIA H
115 ST. JUDE LANE
OSTEEN, FL 32764 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:

05/24/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: POULIN, HAZEN A
Address: 269 SHADYDALE CT
City-St-Zip: DELTONA, FL 32738

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: POULIN, HAZEN A
Address: 115 ST. JUDE LANE
City-St-Zip: OSTEEN, FL 32764

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: PATRICIA H POULIN

AGEN

05/24/2006

Electronic Signature of Signing Officer or Director

Date