

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000071571

FILED  
Apr 04, 2006  
Secretary of State

Entity Name: HUGGINS JANITORIAL & PAINTING, INC.

**Current Principal Place of Business:**

10639 W PALMETTO STREET  
HOMOSASSA, FL 34448 US

**New Principal Place of Business:**

**Current Mailing Address:**

10639 W PALMETTO STREET  
HOMOSASSA, FL 34448 US

**New Mailing Address:**

FEI Number: 20-1102556      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HAMMETT, JOHN R CPA  
5353 SW COLLEGE ROAD  
OCALA, FL 34474 US

**Name and Address of New Registered Agent:**

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: HUGGINS, FRANCES E  
Address: 10639 W PALMETTO STREET  
City-St-Zip: HOMOSASSA, FL 34448 US

Title: SD ( ) Delete  
Name: HUGGINS, WILLIAM D  
Address: 10639 W PALMETTO STREET  
City-St-Zip: HOMOSASSA, FL 34448 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: HUGGINS, CARLA J  
Address: P O BOX 240  
City-St-Zip: HOMOSASSA, FL 34487 US

Title: VP (X) Change ( ) Addition  
Name: KELLY, SHANNON C  
Address: P O BOX 294  
City-St-Zip: HOMOSASSA, FL 34487 US

Title: ST ( ) Change (X) Addition  
Name: HUGGINS, FRANCES E  
Address: 10639 W PALMETTO STREET  
City-St-Zip: HOMOSASSA, FL 34448 US

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: FRANCES E HUGGINS

ST

04/04/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date