

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000107653

FILED
Aug 05, 2006
Secretary of State

Entity Name: BACKYARD PATIO ROOMS INC.

Current Principal Place of Business:

2397 SE LUAU AVE.
PORT SAINT LUCIE, FL 34952

New Principal Place of Business:

1848 COMMERCE AVE
VERO BEACH, FL 32960

Current Mailing Address:

2397 SE LUAU AVE.
PORT SAINT LUCIE, FL 34952

New Mailing Address:

1848 COMMERCE AVE
VERO BEACH, FL 32960

FEI Number: 83-0348899

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACK-HOGAN, LISA J
2397 SE LUAU AVE.
PORT SAINT LUCIE, FL 34952 US

Name and Address of New Registered Agent:

MACK-HOGAN, LISA J
1065 RUBY AVE SW
VERO BEACH, FL 32968 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: LISA J MACK HOGAN

08/05/2006

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: HOGAN, DANIEL C SR.
Address: 2397 SE LUAU AVE.
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: VP () Delete
Name: MACK-HOGAN, LISA J
Address: 2397 SE LUAU AVE.
City-St-Zip: PORT SAINT LUCIE, FL 34952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HOGAN, DANIEL C SR.
Address: 1065 RUBY AVE SW
City-St-Zip: VERO BEACH, FL 32968

Title: VP (X) Change () Addition
Name: MACK-HOGAN, LISA J
Address: 1065 RUBY AVE SW
City-St-Zip: VERO BEACH, FL 32968

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: LISA J MACK- HOGAN

VP

08/05/2006

Electronic Signature of Signing Officer or Director

Date