2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 15, 2006 8:00 am Secretary of State **DOCUMENT # P05000084438** 02-15-2006 90046 019 ***150.00 1. Entity Name 2020 TRIM, INC. Principal Place of Business Mailing Address 66005276 2522 N. EAST AVE. PANAMA CITY FL 32404 2020 CLAY AVE. PANAMA CITY FL 32405 2. Principal Place of Business. 3. Mailing Address Suite, Act. #. etc. Suite, Apt. #. etc. City & State City & State Applied For Not Applicable Country Country \$8.75 Additional 8. Name and Address of Current Registered Agent Name and Address of New Registered Agent ROUNTREE, LELIA V Sirest Address (P.O. Box Number is Not Acceptable) 521 E. 4TH ST. PANAMA CITY FL 32401 City Zip Code 8. 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. I em familiar with, and accept the obligations of registered agent. (POPE: Represent Agent agranum required when an DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Litate Check Payable to Florida Department of State Election Campaign Financing Trust Fund Contribution. 10 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 WIE C) Delate DDF Change () Addition RICHARD, GERRY L **JUNE** STREET ADDRESS 2020 CLAY AVENUE STREET ACCINESS CDTY - 57 - 28 PANAMA CITY FL 32405 CITY-SI-EF me ☐ Dalete m Change Addition HALE KALE STREET AUCKRESS STREET ADDRESS OTY - 51 - 79 CITY-ST-ZIP me Change I Addition HAVE STREET ADDRESS STREET ADDRESS City:ST:7P CITY-SI-ZP MLE D Delete ☐ Addition STREET ACCORESS STREET ADDRESS CITY-ST-200 CITY-57-20P TITLE Ocieta TITLE ☐ Adolion NAME OF STREET ADDRESS STREET ACCRESS CITY-SI-ZIF CTTY - 51 - 88* DILE Orten BILE ☐ Change ☐ Addition HAKE NAME STREET ADMISSS STREET ADDRESS CITY-51-77

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12. I hereby certify that the information supplied with this fiting does not quality for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and occurrate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the occurrence or trustee empowered to execute this report is seed by Chapter 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other bke empowered. SIGNATURE: Menn Z. Richard Gerryh, Richard 1/31/06



March 6, 2006

2020 TRIM, INC. 2020 CLAY AVE. PANAMA CITY, FL 32405

Subject: 2020 TRIM, INC.

Reference Number: **P05000084438**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

The Federal Employer Identification Number listed in Block 4 appears to be invalid. An FEI number is comprised of nine digits and it is not the same as your Social Security number. Please amend your document accordingly. For more information about the FEI number, please call the Internal Revenue Service at 1-800-829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/MH ANNUAL REPORTS SECTION