


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 03, 2006 08:00 AM
Secretary of State

| | |
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| DOCUMENT # 245700 1. Entity Name S. E. MORRIS AND SONS, INCORPORATED |  |
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Principal Place of Business
**3199 VALLEY RANCH ROAD
VERNON, FL 32462 US**

Mailing Address
**3199 VALLEY RANCH ROAD
VERNON, FL 32462 US**



03292006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

| | |
|--|--|
| 4. FEI Number 59-0912153 | Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/> |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

8. Name and Address of Current Registered Agent

**MORRIS, TOM E
3199 VALLEY RANCH ROAD
STAR ROUTE BOX 224
VERNON, FL 32462**

**DO NOT WRITE
IN THIS SPACE**

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 am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**000000489019
04/17/06-80029-020 150.00**

10. OFFICERS AND DIRECTORS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P MORRIS, T.E. 3199 VALLEY RANCH ROAD VERNON, FL |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D MORRIS, T.E. 3199 VALLEY RANCH ROAD VERNON, FL |
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Tom Edd Morris T.E. Morris 3/23/06 1850 535261
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #