


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 16, 2006 08:00 AM
Secretary of State

DOCUMENT # 275028
 1. Entity Name
 STATE CONTRACTOR SPECIALTIES, INC.



Principal Place of Business Mailing Address
 3010 NORTH WALDO ROAD 3010 NORTH WALDO ROAD
 GAINESVILLE, FL 32609-3323 GAINESVILLE, FL 32609-3323



05122006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For
 59-1095206 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 DAUGHERTY, HARRY H
 3010 N. WALDO RD.
 GAINESVILLE, FL 32609

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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 _____ DATE _____
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$550.00
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	S
NAME	DAUGHERTY, HARRY H.
STREET ADDRESS	3010 NORTH WALDO RD
CITY - ST - ZIP	GAINESVILLE, FL
TITLE	D
NAME	DAUGHERTY, MARJORIE D
STREET ADDRESS	3010 NORTH WALDO RD
CITY - ST - ZIP	GAINESVILLE, FL
TITLE	P
NAME	DAUGHERTY, HARRY, H, JR
STREET ADDRESS	3010 NORTH WALDO RD
CITY - ST - ZIP	GAINESVILLE, FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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 05/20/06-80092-001 150.00

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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: Harry H Daugherty Jr Date: 5-12-06 Daytime Phone #: 352 372 6315
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

** Request Waiver of Fee*