## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 672870  MAINT-CO SERVICES, INC.  Mainty-Address TIRSS N W 1ST AVENUE GANESVILLE, FL 32607  DO NOT WRITE IN THIS SPACE  THIS SPACE  A FEW Number	ANNUAL REPORT								
ANIT-CO SERVICES, INC.  2006 APR 19 AM 10: 12  SECRETARY OF STATE TALLAHASSE, FLORIDA  11635 N W 1ST AVENUE GAINESVILLE, FL 32607  DO NOT WRITE IN THIS SPACE  1637 N W 1ST AVENUE GAINESVILLE, FL 32607  DO NOT WRITE IN THIS SPACE  1630 N N 1ST AVENUE GAINESVILLE, FL 32607  CUSTIS, JOHN M 11635 N W 1ST AVENUE GAINESVILLE, FL 32607  DO NOT WRITE IN THIS SPACE  1. Fill provides the company of the purpose of changing its registered office or registered agent, or both, in the State of Finde. I am familiar with, and accept the obligations of registered agent. Or both, in the State of Finde. I am familiar with, and accept the obligations of registered agent. Or both, in the State of Finde. I am familiar with, and accept the obligations of registered agent. Or both, in the State of Finde. I am familiar with, and accept the obligations of registered agent. Or both, in the State of Finde. I am familiar with, and accept the obligations of registered agent. Or both, in the State of Finde. I am familiar with, and accept the obligations of registered agent. Or both, in the State of Finde. I am familiar with, and accept the obligations of registered agent. Or both, in the State of Finde. I am familiar with, and accept the obligations of registered agent. Or both, in the State of Finde. I am familiar with, and accept the obligations of registered agent. Or both, in the State of Finde. I am familiar with, and accept the obligations of registered agent. Or both, in the State of Finde. I am familiar with, and accept the obligations of registered agent. Or both, in the State of Finde. I am familiar with, and accept the obligations of registered agent. Or both, in the State of Finde. I am familiar with, and accept the obligations of registered agent. Or both, in the State of Finde. I am familiar with, and accept the obligations of registered agent. Or both, in the State of Finde. I am familiar with, and accept the obligations of registered agent. Or both, in the State of Finde. I am familiar with, and accept the obligations of regis					FILED				
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S. Sane and Address of Current Registered Agent  CURTIS, JOHN M 11635 N W 1ST AVENUE GAINESVILLE, FL 32607  B. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  SIGNATURE  FILE NOWIT FEE IS \$150.00  After May 1, 2006 Fee will be \$550.00  OFFICERS AND DIRECTORS  THE NOWIT IS GAIL  OFFICERS AND DIRECTORS  OFFICERS AND DIRECTOR	<b>D</b>	O NOT WRITE	, CE	03012006	No Chg-P	CR2E034	(11/05)		
S. Name and Address of Current Registered Agant  CURTIS, JOHN M 11835 N W 1ST AVENUE GAINESVILLE, FL 32607  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in this State of Florida. I am familiar with, and accept the orligations of registered agent, or both, in this State of Florida. I am familiar with, and accept the orligations of registered agent, or both, in this State of Florida. I am familiar with, and accept the orligations of registered agent, or both, in this State of Florida. I am familiar with, and accept the orligations of registered agent, or both, in this State of Florida. I am familiar with, and accept the orligations of registered agent, or both, in this State of Florida. I am familiar with, and accept the orligations of registered agent, or both, in this State of Florida. I am familiar with, and accept the orligations of registered agent, or both, in this State of Florida. I am familiar with, and accept the orligations of registered agent, or both, in this State of Florida. I am familiar with, and accept the orligations of registered agent, or both, in this State of Florida. I am familiar with, and accept the orligations of registered agent, or both, in this State of Florida. I am familiar with, and accept the orligations of registered agent, or both, in this State of Florida. I am familiar with, and accept the orligations of registered agent, or both, in this State of Florida. I am familiar with, and accept the orligations of registered agent, or both, in this State of Florida. I am familiar with, and accept the orligations of registered agent, or both, in this State of Florida. I am familiar with, and accept the orligations of registered agent, or both, in this State of Florida. I am familiar with, and accept the orligations of registered agent, or both, in this State of Florida. I am familiar with, and accept the orligations of registered agent, or both, in this State of Florida. I am familiar with, and accept the orligations of reg	DO NOT WRITE IN THIS SPACE			CE				<u> </u>	
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12. I hereby certify that the information supplied with this filling 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									

John M. Curtis
President
Mighature for Typed or Printed Name of Signing Officer or Director

04/17/06 352-332-0838

SIGNATURE: