

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000002926

FILED
Feb 08, 2006
Secretary of State

Entity Name: NEILL AND GUNTER INCORPORATED

Current Principal Place of Business:

482 PAYNE ROAD
SCARBOROUGH, ME 04074

New Principal Place of Business:

Current Mailing Address:

482 PAYNE ROAD
SCARBOROUGH, ME 04074

New Mailing Address:

FEI Number: 01-0333227

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BORDONARO, JAMES
CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SHELLEY, WILLIAM F
Address: 30 FRAN CIRCLE
City-St-Zip: GRAY, ME 04039

Title: VTSD () Delete
Name: BIGGS, SUSAN J
Address: 23 SYLVAN ROAD
City-St-Zip: SCARBOROUGH, ME 04074

Title: D () Delete
Name: RENT, PETER J
Address: 100 MAIN STREET
City-St-Zip: DARTMOUTH, NS B2X 1R5 CN

Title: D () Delete
Name: REEDER, KENNETH F
Address: 191 PROSPECT STREET
City-St-Zip: FREDERICTON, NB E3B 5B4 CN

Title: D () Delete
Name: WARD, BRUCE A
Address: 40 VALLEY VIEW DRIVE
City-St-Zip: GORHAM, ME 04038

Title: C () Delete
Name: NEILL, ROBERT D
Address: 191 PROSPECT STREET/FREDERICTON
City-St-Zip: NB CANADA E3B 5B4,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SUSANJ. BIGGS

VTSD

02/08/2006

Electronic Signature of Signing Officer or Director

Date