

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J04335

FILED
Jul 06, 2006
Secretary of State

Entity Name: BARNETT HOLDING, INC.

Current Principal Place of Business:

13447 BYRD DR
P.O.BOX 934
ODESSA, FL 33556 US

New Principal Place of Business:

Current Mailing Address:

13447 BYRD DRIVE
P.O.BOX 934
ODESSA, FL 33556 US

New Mailing Address:

FEI Number: 59-2652693 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RADICS JR, MICHAEL J.
13447 BYRD DR
ODESSA, FL 33556 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: STD () Delete
Name: RADICS, MICHAEL J. J, R.
Address: 13447 BYRD DR.
City-St-Zip: ODESSA, FL

Title: D () Delete
Name: BARNETT, BERNARD T.,
Address: ETtingshall Road
City-St-Zip: MIDLANDS, ENGLAND, UK

Title: PD () Delete
Name: HOULLIS, MICHAEL N.,
Address: 13447 BYRD DR.
City-St-Zip: ODESSA, FL

Title: D () Delete
Name: BERNETT, DAVID
Address: E HIGHSELL RD.
City-St-Zip: MIDLANDS ENGLAND, UK

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: VPD (X) Change () Addition
Name: BERNETT, DAVID
Address: E HIGHSELL RD.
City-St-Zip: MIDLANDS ENGLAND, UK

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: MICHAEL RADICS

STD

07/06/2006

Electronic Signature of Signing Officer or Director

Date