

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J28395

FILED
Mar 14, 2006
Secretary of State

Entity Name: BARBER'S MACHINERY INC.

Current Principal Place of Business:

% MILTON J. BARBER
PO BOX 3306
LAKE WALES, FL 338590306

New Principal Place of Business:

% MILTON J. BARBER
5 EAST LINCOLN AVENUE
LAKE WALES, FL 33859

Current Mailing Address:

% MILTON J. BARBER
PO BOX 3306
LAKE WALES, FL 338590306

New Mailing Address:

FEI Number: 59-2707953 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARBER, MILTON J MR.
5 EAST LINCOLN AVE
LAKE WALES, FL 33853 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: DP () Delete
Name: BARBER, MILTON J MR
Address: 5 E LINCOLN AVE
City-St-Zip: LAKE WALES, FL

Title: DST () Delete
Name: BARBER, PAMELA K.
Address: 5 E LINCOLN AVE.
City-St-Zip: LAKE WALES, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: BARBER, MILTON J MR
Address: P O BOX 3306
City-St-Zip: LAKE WALES, FL 338593306 US

Title: DST (X) Change () Addition
Name: BARBER, PAMELA K
Address: P O BOX 3306
City-St-Zip: LAKE WALES, FL 338593306 US

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: PAMELA BARBER

SEC

03/14/2006

Electronic Signature of Signing Officer or Director

_____ Date