2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2006
Secretary of State

DOCUMENT# J64063

Entity Name: CUSTOM CRAFTSMEN SERVICES, INC.

Current Principal Place of Business:

887 NE DIXIE HWY
#6
JENSEN BEACH, FL 34957

New Principal Place of Business:

Current Mailing Address:

887 NE DIXIE HWY
#6
JENSEN BEACH, FL 34957

New Mailing Address:

FEI Number: 59-2794416 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KOEBE, BRUCE A.
2477 NE DIXIE HIGHWAY
JENSEN BEACH, FL 34957 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: NORRIS, W.O.
Address: 1585 N.E. BEACON DRIVE
City-St-Zip: JENSEN BEACH, FL 34957

Title: VSD ( ) Delete
Name: MICHAEL, JOSHUA
Address: 467 SE STREAMLET AVE.
City-St-Zip: PORT ST. LUCIE, FL 34983

Title: TD ( ) Delete
Name: NORRIS, JUDITH
Address: 1585 N.E. BEACON DRIVE
City-St-Zip: JENSEN BEACH, FL

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:

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: W O NORRIS PD 03/01/2006

Electronic Signature of Signing Officer or Director — Date