2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 25, 2006 8:00 am Secretary of State 04-25-2006 90113 049 ***158.75

DOCUMENT # K20746 1. Entity Name JENNINGS DECKS, INC.					04-25-2006 90113 049 ***158.75
Principal Place of Business 21420 LOCKHART ROAD DADE CITY, FL 33523 US		Mailing Address 21420 LOCKHART ROAD DADE CITY, FL 33523 US		:	I ARRIPHIR BIR HTAN BETIN KRON BIRING COM BIBNI BIRIN BIRIN BIRIN BIRING HAN HOEL
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04172006 Chg-P CR2E034 (11/05)
City & State		City & State			4. FEI Number Applied For 59-2885566 Not Applicable
Zip	Country	Zip	Coun	try	5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent
JENNINGS, WILLAIM D 21420 LOCKHART RD			Name Street Address ((P.O. Box Number is Not Acceptable)	
DADE CITY, FL 33525:					
				City	FL Zip Code
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed ritime of registered agent applicable. (NOTE: Registered Agent signature trequired when reinctating)					
FILE NOWI!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees					
10.	OFFICERS AND		11.	OPENT	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 If am David Jenning & Change Bradition
TITLE NAME	PRES DESIMONE, ANTHONY E	Delete	TITL:	1 1 2 1 7 -	
STREET ADDRESS	33249 PENNSYLVANIA AVE.			ET ADDRESS 21	420 Lockhart Rd.
CITY-ST-ZIP	RIDGE MANOR, FL 33523		CITY	-ST-ZIP Da	Ne. CHV. Fl. 33523
TITLE	VP	Delete	TITL	E	☐ Change ☐ Addition
NAME	JOHN, YOUNG A		NAM	_	
STREET ADDRESS City+St-Zip	P. O. BOX 91 LACOOCHEE, FL 33537			ET ADDRESS -ST-ZIP	market (
TITLE	SEC	Delete Delete	TITL	: Se	Thony Pennsylvania Ave.
NAME	KANGAS, TIMOTHY J		NAM	42	Thony Desimiente
STREET ADDRESS CITY-ST-ZIP	P.O. BOX 907 LACOOCHEE, FL 33537			ET ADORESS 33	dge Manor, FL. 33523
TITLE	CHAI	☐ Delete	īm	F	Change Addition
NAME	JENNINGS, WILLIAM D	L DONIE	NAM		
STREET ADDRESS	21420 LOCKHART RD			EET ADDRESS	
CITY-ST-ZIP	DADE CITY, FL 33523		CITY	'-ST-ZIP	
TIFLE	ł	☐ Delete	TITL		☐ Change ☐ Addition
I MANAGE				IC I	
NAME STREET ADDRESS				EET ADDRESS	
NAME STREET ADDRESS CITY-ST-ZIP			STRE	EET ADDRESS '- ST-ZIP	
STREET ADDRESS		☐ Delete	STRE	-ST-ZIP	☐ Change ☐ Addition
STREET ADDRESS CITY-ST-ZIP		☐ Delete	STRI CITY TITL NAM	'-ST-ZIP E IE	☐ Change ☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE		☐ Delete	STRI CITY TITL NAM STRI	'-ST-ZIP E	☐ Change ☐ Addition

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE.

De Jamesias William Dean Jennings