2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K76277

FILED Apr 14, 2006 Secretary of State

Entity Name: SAVILLE & SON OFFICE MAINTENANCE, INC.

Current Principal Place of Business:		New Principal Place of Business:		
40 WHITI	J. SAVILLE EWATER DR BEACH, FL 33			
Current Mailing Address:		ss:	New Mailing Address:	
40 WHIT	J. SAVILLE EWATER DR BEACH, FL 33			
El Number	: 65-0113348	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)
ame and	Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:
AVILLE, I				
	EWATER DR BEACH, FL 33			
/ PALM E he above	BEACH, FL 33	3413 US	ourpose of changing its registere	ed office or registered agent, or both,
/ PALM E he above	BEACH, FL 33 named entity e of Florida.	3413 US	purpose of changing its registere	ed office or registered agent, or both,
/ PALM E he above the State	BEACH, FL 33 named entity of Florida. RE:	3413 US		ed office or registered agent, or both, Date
/ PALM E he above the State	BEACH, FL 33 named entity of Florida. RE: Electro	3413 US submits this statement for the		
PALM E he above the State IGNATUI	BEACH, FL 33 named entity of Florida. RE: Electro	submits this statement for the submits this statement for the nic Signature of Registered Ager Trust Fund Contribution ().	ent	
PALM E he above the State IGNATUI	e named entity e of Florida. RE: Electro mpaign Financir S AND DIRECT P (SAVILLE, DAV 640 WHITEW)	submits this statement for the nic Signature of Registered Agg Trust Fund Contribution (). CTORS:) Delete ID B	ent	Date
he above the State IGNATUI lection Car PFFICER: tte: ame: ddress:	e named entity e of Florida. RE: Electro mpaign Financir S AND DIRECT P (SAVILLE, DAVICE,	submits this statement for the nic Signature of Registered Agg Trust Fund Contribution (). CTORS: Delete ID B ATER DR. BEACH, FL 33413 Delete PH JCKLE	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

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: LINDA J. SAVILLE VSD 04/14/2006