2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 14, 2005 8:00 am Secretary of State

DOCUMENT # L.19635 1. Entity Name CUSTOM TRIM AND INTERIOR WOODWORKING, INC.						02-14-200:	5 90050 0	17 ***15	0.00
Principal Place of Business 11963 N. ELLSWORTH TERR DUNNELLON, FL 34433 US Mailing Address PO BOX 244 DUNNELLON, FL 34434				S		400179	34		
2. Principal Place of Business		3. Mailing Addre	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, e	Suite, Apt. #, etc.		01242005	Chg-P	CR2E0	34 (10/03)	
City & State		City & State	City & State		4. FEI Number 59-2971	443	,	<u> </u>	oplied For ot Applicable
Zip	Country	Zip	Cou	ntry	5. Certificate of	Status Desired		\$8.75 Add Fee Require	
	6. Name and Address of Cu	7. Name and Address of New Registered Agent .							
HAMMOCK, WILLIAM J			Name Street Address (P.O. Box Number is Not Acceptable)						
11963 N ELLSWORTH TERR DUNNELLON, FL 34433							····.		
				City			FL	Zip Cod	le
	named entity submits this statement	 red office or register	red agent, or both,	in the State of F		familiar with,	and accept		
_	lions of registered agent.								
SIGNATURE.	Signature, typed or printed name of registered	agent and title if applicable.	(NOTE: Register	ed Agent signature required	I when reinstating)		DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$5	س. ب ا	n Campaign Fina und Contribution	ncing _ \$5	.00 May Be led to Fees				
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After Ma	ay 1, 2005 Fee will be \$5	550.00 Trust F	n Campaign Fina und Contribution	ncing \$5.	.00 May Be ed to Fees	HANGES TO OF		DIRECTOR Change	S IN 11
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Indicated on this report or supplier with his filling does not qualify to the exception stated in Section 19.07(3)(), Florida Statutes. Further certing that the mormation indicated on this report or supplieriental 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.

William A Hormon Printed Name of Skaning Officer or Director

352-246.-7389

Daytime Phone #