

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L45381

FILED
Apr 30, 2007
Secretary of State

Entity Name: PREMIERE CARPENTRY SERVICE, INC.

Current Principal Place of Business:

533 TIFFANY LANE
SANFORD, FL 32773

New Principal Place of Business:

Current Mailing Address:

533 TIFFANY LANE
SANFORD, FL 32773

New Mailing Address:

FEI Number: 59-2995058

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIXON, WILLIAM C.
533 TIFFANY LANE
SANFORD, FL 32773 US

Name and Address of New Registered Agent:

MIXON, TAMMY L
533 TIFFANY LANE
SANFORD, FL 32773 US

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: TAMMY L MIXON

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MIXON, WILLIAM C.,
Address: 533 TIFFANY LANE
City-St-Zip: SANFORD, FL 32773

Title: S () Delete
Name: MIXON, TAMMY
Address: 533 TIFFANY LANE
City-St-Zip: SANFORD, FL 32773

Title: VP () Delete
Name: FLANAGAN, JAMES
Address: 1445 MARSH CREEK LANE
City-St-Zip: ORLANDO, FL 32839

Title: D (X) Delete
Name: MIXON, TYLER J
Address: 533 TIFFANY LANE
City-St-Zip: SANFORD, FL 32773

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MIXON, TAMMY L,
Address: 533 TIFFANY LANE
City-St-Zip: SANFORD, FL 32773

Title: VP (X) Change () Addition
Name: FLANAGAN, JAMES J JR
Address: 3259 W. STATE ROAD 46
City-St-Zip: GENEVA, FL 32732

Title: D (X) Change () Addition
Name: MIXON, TYLER J
Address: 533 TIFFANY LANE
City-St-Zip: SANFORD, FL 32773

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: TAMMY L MIXON

PRES

04/30/2007

Electronic Signature of Signing Officer or Director

Date