

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # L65389

1. Entity Name
ELLIS MECHANICAL CORPORATION



Principal Place of Business
**765 BIG TREE DRIVE
 LONGWOOD, FL 32750-3513 US**

Mailing Address
**765 BIG TREE DRIVE
 LONGWOOD, FL 32750-3513 US**



04052008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3002949** Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**WILLIAM P. WEATHERFORD JR.
 1150 LOUISIANA AVENUE SUITE 4
 WINTER PARK, FL 32790-2566**

**DO NOT WRITE
 IN THIS SPACE**

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 name of registered agent and title if applicable

(NOTE: Registered Agent signature required when renewing)

DATE _____

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD ELLIS, WILLIAM R. 9013 LAKE HOPE DR. MAITLAND, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD STEVE R. ELLIS 780 PICKERINGTON PLACE OVIDO, FL 32765
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TSD KAY S. ELLIS 9013 LAKE HOPE DR MAITLAND, FL
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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 04/29/06-80082-010 150.00

**DO NOT WRITE
 IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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: L. Joo P. Joo, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/13/06 - 407-834-9990
Date Daytime Phone #