


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 08, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L86516</b> 1. Entity Name PRATER'S CARPENTRY, INC.	
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Principal Place of Business 230 PANAMA DRIVE CRESTVIEW, FL 32536-2314	Mailing Address 230 PANAMA DRIVE CRESTVIEW, FL 32536-2314
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**DO NOT WRITE IN THIS SPACE**



01042007 No Chg-P CR2E034 (11/05)

4. FEI Number <b>NOT APPLICABLE</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

PRATER, DONALD  
230 PANAMA DRIVE  
CRESTVIEW, FL 32536-2314

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PRATER, DONALD 230 PANAMA DRIVE CRESTVIEW, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST PRATER, JEANETTE 230 PANAMA DRIVE CRESTVIEW, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PRATER, RACHEL 230 PANAMA DRIVE CRESTVIEW, FL 325362314
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PRATER, PAMELA 230 PANAMA DRIVE CRESTVIEW, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000577403  
01/08/07-80014-021 150.00

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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: *J A Prater* 1/4/07 850-682-5750  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #