2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2007 08:00 AM
Secretary of State

ANNUAL ĶEPURI							
DOCUMENT # L96331					Secretar	y of Sta	
	CARPENTRY, INC.						
Principal Plac	e of Business	Mailing Address		-			
8308 PELIC		8308 PELICAN RD					
ENGLEWOOD), FL 34224	ENGLEWOOD, FL 34224					
				01042007 No Chg	ı-P CR2E034 (1	1/05)	
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بنا	O MOI ANKLIE			4. FEI Number 65-0217258		Applied For Not Applicable	
	•		•	5. Certificate of Status De	sired \$8.7	5 Additional	
				5. Certificate of Status De		tequired	
ļ	6. Name and Address of Current F	legistered Agent	L. L. Alm. L. oil ist toning	white the tree has been been been	anging and agreement in a	्र च नुद्राद्य द्वाराष्ट्री ज्यांकः । अन् स्टब्स्ट्रीहरू	
ROLLING,	, JOSEPH E SR		DO NOT	WRITE			
8308 PELICAN RD ENGLEWOOD, FL 34224			1. 1				
ENGLEWOOD, FL 34224				IN THIS	SPACE		
				,			
8. The above	named entity submits this statement for	the purpose of changing its registe	red office or register	red agent, or both, in the Sta	te of Florida. I am familia	ar with, and accept	
the obligat	tions of registered agent.	,	_	•			
SIGNATURE.							
	Signature, typed or printed name of registered agent a	nd little if applicable. (NOTE: Register	ed Agent signature requires	a when reinstating)	DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.0	S. Election Campaign Fina Trust Fund Contribution		.00 May Be led to Fees			
10.	OFFICERS AND	DIRECTORS	15. Sec. 3. 346				
TITLE	D						
NAME	ROLLING, JOSEPH E				, se 1	, , ,	
STREET ADDRESS	8308 PELICAN RD ENGLEWOOD, FL		•	•			
TITLE	D			" " 14 m	100000007770	*	
NAME	ROLLING, JOYCE				0000607773 /07-800\$1 ₅ 00	2 150 00	
STREET ADDRESS	8308 PELICAN RD		atore a		ro veneral	c racylat. }	
CITY-ST-ZIP	ENGLEWOOD, FL		-				
NAME				, ' ,			
STREET ADDRESS			Police in Francisco	- DO NOT	WRITE	Sar Sar Sarah	
CITY-ST-ZIP					,		
TITLE NAME				IN THIS	SPACE		
STREET ADDRESS			,	a to		***	
CITY-ST-ZIP				r	•		
TITLE				u .	•	•	
NAME STREET ADDRESS				A Company of the State of the S	*		
CITY-ST-ZIP						A STATE OF THE STA	
TITLE						A Town of the state of the stat	

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.

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE: J. E. Rolling SOSEPH F. ROLLING SR. 1-25-07 697 3571