2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M79294

FILED Feb 13, 2006 Secretary of State

Entity Name: MAGNOLIA NEW HOMES AND RENOVATIONS, INC.

Current Principal Place of Business:			New Principal Place of Business:		
000 MOB UITE 7	BILE HWY.				
	DLA, FL 32506	US			
Current Mailing Address:			New Mailing Address:		
	BILE HWY.				
UITE 7 ENSACC	DLA, FL 32506	US			
FEI Number: 59-2886840		FEI Number Applied For ()	FEI Number Not App	licable () Certificate of Status Desired ()	
ame and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
UITE 13	OU BLVD. DLA, FL 32503	110			
ne above	,		ourpose of changing	ts registered office or registered agent, or both	
ne above	named entity s e of Florida.		ourpose of changing	ts registered office or registered agent, or botl	
ne above the State	e named entity s e of Florida. RE:		, , ,	ts registered office or registered agent, or botl Date	
ne above the State GNATUI	e named entity s e of Florida. RE: Electroni	ubmits this statement for the p	, , ,		
ne above the State GNATUI	e named entity s e of Florida. RE: Electroni	ubmits this statement for the posterior c Signature of Registered Age Trust Fund Contribution ().	ent		
ne above the State GNATUI	e named entity see of Florida. RE: Electroni mpaign Financing S AND DIRECT	ubmits this statement for the processing contribution (). FORS: Delete ELL,	ent	Date	
ne above the State GNATUI ection Car FFICER: ame: ldress:	e named entity see of Florida. RE: Electroni mpaign Financing S AND DIRECT D () LIECHTY, DARR 3443 MAIKAI DR PENSACOLA, FI	ubmits this statement for the processing contribution (). FORS: Delete ELL, 2. 32526 Delete THAN EIVE	ent ADDITION Title: Name: Address:	Date IS/CHANGES TO OFFICERS AND DIRECTO	

I hereby certify that the information supplied with this filing does not qualify for the 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: DARRELL LIECHTY	D	02/13/2006
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