## 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## FILED Feb 01, 2007 08:00 AM DOCUMENT # P00000071319 Secretary of State 1. Entity Name TERRY'S FRAMING, INC. Principal Place of Business Mailing Address 3817 118TH ST. W. BRADENTON FL 34210 5360 GILF OF MEXICO LONGBOAT KEY FL 34228 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) Applied For City & State City & Stato 4. FEI Number 65-1028818 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PETESCH, TERRY A Street Address (P.O. Box Number is Not Acceptable) 3817 118TH ST. W. **BRADENTON FL 34210** Zip Code City 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 reinstating) Signature, typed or printed name of registered agent and title if applicable DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. ☐ Change Addition HITE ☐ Delete TITLE PETESCH, TERRY A NAMI' NAME U00000615259 3817 118TH ST. W. STREET LADDRESS STREET ADDRESS 02/06/07-80064-013 150.00 **BRADENTON FL 34210** CHY-SL-7IP CHY-S1-ZIP ☐ Delete ☐ Change ☐ Addition THE 11111 NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-/IP CHY-SI-762 Delete ☐ Addition NAME NAMI STREET ADDRESS STREET ADDRESS CHY-SI-7IP CITY-ST-7IP ☐ Addition Change Delete 11116 NAMI NAMI' STREET ADDRESS STREET ADDRESS CBY-SI-7P CHY-SI-ZIP BILL ☐ Delete HILL ☐ Change ☐ Addition NAME NAMI STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - S1 - 7/P Delete THILE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST- ZIP CHY-SI-7IP 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutos. 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 eath, 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 Statutos; 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.