

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000011369

FILED
Jan 20, 2006
Secretary of State

Entity Name: T & M PORTABLE RESTROOMS, INC.

Current Principal Place of Business:

240 BRIDGE ST.
LABELLE, FL 33975

New Principal Place of Business:

Current Mailing Address:

PO BOX 610
LABELLE, FL 33975

New Mailing Address:

FEI Number: 65-1085744

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACKSON, P. WAYNE
240 BRIDGE ST.
LABELLE, FL 33975 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JACKSON, P. WAYNE
Address: 240 BRIDGE ST.
City-St-Zip: LABELLE, FL 33975

Title: S () Delete
Name: KELLER, PAMELA K
Address: 240 S BRIDGE ST.
City-St-Zip: LABELLE, FL 33935

Title: V () Delete
Name: GREEN, CARL A
Address: 240 BRIDGE ST.
City-St-Zip: LABELLE, FL 33975

Title: T () Delete
Name: MCTHENY, MARVIC
Address: 240 BRIDGE ST.
City-St-Zip: LABELLE, FL 33975

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: METHANY, MARVIN
Address: 240 BRIDGE ST.
City-St-Zip: LABELLE, FL 33975

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: PAMELA K KELLER

S

01/20/2006

Electronic Signature of Signing Officer or Director

Date