# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000014531

Entity Name: LIFETIME FENCE, INC

FILED May 11, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business	Current Principal Place of Business:	New Principal Place of Business
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**VOLUSIA COUNTY** 2598 GRANDE VALLEY BLVD. DELTONA, FL 32725

#6111

ORANGE CITY, FL 32763

**Current Mailing Address: New Mailing Address:** 

1401 BROKEN PINE RD 2598 GRANDE VALLEY BLVD.

DELTONA, FL 32725 6111

ORANGE CITY, FL 32763

FEI Number: 45-1546000 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

#### Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DICKERSON, LEWIS K DICKERSON, LEWIS K 180 MAGNOLIA WOODS CT #16D 2598 GRANDE VALLEY BLVD. DELTONA, FL 32725 #6111 ORANGE CITY, FL 32763 US

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: 05/11/2006

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete () Change () Addition

DICKERSON, LEWIS K Name: Name: 2598 GRANDE VALLEY BLVD #6111 Address: Address: City-St-Zip: ORANGE CITY, FL 32763 City-St-Zip:

Title: DV Title: (X) Change ( ) Addition () Delete

Name: MCKELVIN, ANDREW Name: GIRST, CHRISTINA R

530 BELLTOWER AVE #A12 2598 GRANDE VALLEY BLVD.#6111 Address: Address: ORANGE CITY, FL 32763 DELTONA, FL 32725 City-St-Zip: City-St-Zip:

Title: Title: DST () Delete DT (X) Change ( ) Addition

BISCEGLIA, VINCENT Name: GREGORY, JUSTIN A Name: 531 GENEVA AVE Address: 1080 ALLADIN DR Address: City-St-Zip: DELTONA, FL 32725 City-St-Zip: DELTONA, FL 32725

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: CHRISTINA GIRST 05/11/2006 DV