

**FILED**  
**Aug 08, 2006 8:00 am**  
**Secretary of State**

07-19-2006 90001 007 \*\*\*150.00

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**DOCUMENT # P02000056825**

1. Entity Name  
**ALL TOOLS, INC.**



Principal Place of Business  
**22 LURA LANE  
MERRITT ISLAND, FL 32753**

Mailing Address  
**22 LURA LANE  
MERRITT ISLAND, FL 32753**

**66022798**



07032006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**75-3060412**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**STILES, LENA M  
6996 EVERGREEN DRIVE  
COCOA, FL 32927**

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-stating)

DATE

**FILE NOW!!! FEE IS \$550.00  
Due by September 6, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PTD  
STILES, JEFFERY C SR.  
6996 EVERGREEN DRIVE  
COCOA, FL 32927**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VSD  
STILES, LENA M  
6996 EVERGREEN DRIVE  
COCOA, FL 32927**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

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.

**SIGNATURE:**

*Lena M. Stiles* Vice Pres.  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*6/30/06*  
Date

*331-452-6581*  
Daytime Phone #

ATTACHMENT

66022798

ALL TOOLS, INC.

22 Lura Lane  
Merritt Island, Florida 32953  
(321) 452-6501 (321) 452-6156 fax

July 31, 2006

Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

RE: FEI# 75-3060412  
2006 Annual Report Filing #P02000056825

To Whom It May Concern,

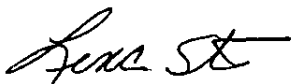
I am writing in response to your letter dated July 20, 2006 (post marked July 28 & received July 31, 2006) stating that I owe a late fee of \$400.00. I did not receive a Notice for Renewal.

On June 30, 2006, I received a post card in the mail "NOTICE OF INTENT TO DISSOLVE", (copy enclosed) telling me to download the 2006 For Profit Corporation Annual Report form from the Internet (Option 2). I promptly downloaded the form and mailed it in along with my annual fee of \$150.00 check # 3807.

Therefore, I am asking that you please wave any late fees and or penalties, since I did not receive prior notice from your office.

Please let me know of your decision so that I can proceed in a timely manner, your letter allows for 30 days from the date of your letter. I appreciate your kind consideration and prompt attention given this matter.

Sincerely,



Lena Stiles  
Vice-President