2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2006
Secretary of State

DOCUMENT# P02000115815

Entity Name: PERFECT SOLUTIONS OF JACKSONVILLE, INC.

Current Principal Place of Business:

2074 MATEFIELD RD.
JACKSONVILLE, FL 32225

New Principal Place of Business:

Current Mailing Address:

2074 MATEFIELD RD.
JACKSONVILLE, FL 32225

New Mailing Address:

FEI Number: 13-4221109 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DURHAM, TOM
2074 MATEFIELD RD.
JACKSONVILLE, FL 32225 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: PD ( ) Delete
Name: DURHAM, TOM
Address: 2074 MATEFIELD RD.
City-St-Zip: JACKSONVILLE, FL 32225

Title: V ( ) Delete
Name: DURHAM, WILLIAM D
Address: 4090 HODGES BLVD APT 1013
City-St-Zip: JACKSONVILLE, FL 32224

Title: VP ( ) Delete
Name: DURNAM, TOMMY L
Address: 3398 HAMSTEAD DR
City-St-Zip: JACKSONVILLE, FL 32225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change ( ) Addition
Name: DURHAM, WILLIAM D
Address: 6617 BLACKWOOD DRIVE
City-St-Zip: JACKSONVILLE, FL 32277

Title: VP (X) Change ( ) Addition
Name: HODGES, DAVID A
Address: 8787 SOUTHSIDE BLVD APT 114
City-St-Zip: JACKSONVILLE, FL 32256

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: TOM DURHAM PRES 04/15/2006

Electronic Signature of Signing Officer or Director Date