

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 03, 2006 08:00**  
**Secretary of Stat**

**DOCUMENT # P02000131587**

1. Entity Name

**MUNSON AND MUNSON BUILDERS, INC.**



Principal Place of Business

**13860 NORTH STATE ROAD 121  
MACLENNY, FL 32063**

Mailing Address

**13860 NORTH STATE ROAD 121  
MACLENNY, FL 32063**



02022006

No Chg-P

CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

**05-0541301**

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**MEIDE, MOSES JR  
817 N MAIN STREET  
JACKSONVILLE, FL 32202**

**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 retaining)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution.



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

10. OFFICERS AND DIRECTORS

TITLE	PSD
NAME	MUNSON, FREDERICK W JR
STREET ADDRESS	13860 NORTH STATE ROAD 121
CITY-ST-ZIP	MACLENNY, FL 32063
TITLE	VTD
NAME	MUNSON, KIM DENISE
STREET ADDRESS	13860 NORTH STATE ROAD 121
CITY-ST-ZIP	MACLENNY, FL 32063
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1100000420374  
02/15/06-80053-006 158.75

**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:

**FREDERICK W. MUNSON JR.**  
**PRESIDENT**

**2/4/06**

Date

**904-239-6514**

Daytime Phone #