

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000012540

FILED
Jan 15, 2006
Secretary of State

Entity Name: GEORGE MEDER MAINTENANCE SERVICES, INC.

Current Principal Place of Business:

3936 S SEMORAN BLVD #451
ORLANDO, FL 32822

New Principal Place of Business:

Current Mailing Address:

3936 S SEMORAN BLVD #451
ORLANDO, FL 32822

New Mailing Address:

FEI Number: 54-2091665

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEDER, GEORGE
3936 S SEMORAN BLVD #451
ORLANDO, FL 32822 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: MEDER, GEORGE
Address: 3936 S SEMORAN BLVD #451
City-St-Zip: ORLANDO, FL 32822

Title: VPT () Delete
Name: MORAN, ANN MARIE
Address: 3936 S SEMORAN BLVD #451
City-St-Zip: ORLANDO, FL 32812

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MEDER, GEORGE L
Address: 3936 S SEMORAN BLVD #451
City-St-Zip: ORLANDO, FL 32822

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

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: ANN MARIE MORAN

VPT

01/15/2006

Electronic Signature of Signing Officer or Director

_____ Date