

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000116860

Entity Name: JULIUS SHIRLEY FRAMING, INC.

FILED
Jan 31, 2008
Secretary of State

Current Principal Place of Business:

1823 BETH LANE
WINTER HAVEN, FL 33880

New Principal Place of Business:

Current Mailing Address:

PO BOX 356
LAKELAND, FL 33802

New Mailing Address:

1823 BETH LANE
WINTER HAVEN, FL 33880

FEI Number: 20-0328531

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHIRLEY, JULIUS M
1823 BETH LANE
WINTER HAVEN, FL 33880 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: CPD () Delete
Name: SHIRLEY, JULIUS M
Address: 1823 BETH LANE
City-St-Zip: WINTER HAVEN, FL 33880

Title: D () Delete
Name: FLETCHER, SEAN D
Address: 530 SKYLINE DR. EAST
City-St-Zip: LAKELAND, FL 33801

Title: D () Delete
Name: TUCKER, LONNIE A
Address: 1324 WEST HUNTER STREET
City-St-Zip: LAKELAND, FL 33815

Title: VS () Delete
Name: CARNAGEY, HAMAKO S
Address: 1823 BETH LANE
City-St-Zip: WINTER HAVEN, FL 33880

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: JULIUS M SHIRLEY

CPD

01/31/2008

Electronic Signature of Signing Officer or Director

Date