## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000124933

City-St-Zip:

PALM COAST, FL 32164

Entity Name: PRECISION CARPENTRY OF FLAGLER, INC.

FILED Sep 05, 2005 Secretary of State

Current P	rincipal Place of Business:	New Principal Place	New Principal Place of Business:	
124 KANE EAST PAL	EROAD LATKA, FL 32131			
Current Mailing Address:		New Mailing Address	<b>3:</b>	
124 KANE EAST PAL	ROAD LATKA, FL 32131			
FEI Number	: FEI Number Applied For	( ) FEI Number Not Applicable (X)	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:		ent: Name and Address o	Name and Address of New Registered Agent:	
124 KANE	I, THOMAS MICHAEL EROAD LATKA, FL 32131 US			
	e named entity submits this statement for e of Florida.	or the purpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:			
	Electronic Signature of Register	ed Agent	Date	
	nce with s. 607.193(2)(b), F.S., the corporation mpaign Financing Trust Fund Contribution (			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ( ) Delete BALDWIN, THOMAS MICHAEL 124 KANE ROAD EAST PALATKA, FL 32131	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D (X) Delete CASOLI, CHARLES A 17 UTHORNE PLACE PALM COAST, FL 32164	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	D (X) Delete GROVER, PETER 17 UTHORNE PLACE	Title: Name: Address:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

City-St-Zip:

SIGNATURE: THOMAS BALDWIN MR 09/05/2005