## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 14, 2006 08:00 AM Secretary of State

DOCUMENT # P03000141115
1. Entity Name
CHRIS STROUSE'S MAINTENANCE SERVICE, INC.



Principal Place of Business

Mailing Address

4642 SOUTHERN PLACE PACE, FL 32571 4642 SOUTHERN PLACE PACE, FL 32571



## DO NOT WRITE IN THIS SPACE

5. Name and Address of Current Registered Agent

03232006 No Chg-P CR2E034 (11/05)

4. FEI Number 04-3780058

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

STROUSE, CHRIS E 4642 SOUTHERN PLACE

## DO NOT WRITE IN THIS SPACE

PACE, FL 32571			IN THIS SPACE		
8. The above the obligat	named entity submits this statement for the priors of registered agent.	surpose of changing its registered	office or	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and fills i	d applicable (NOTE Registered A	gent signatur	e required when reinstaling)	OATE
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.			
10.	OFFICERS AND DIREC	OFFICERS AND DIRECTORS			
DILE NAME STREET ADDRESS CHY-ST-ZIP	P STROUSE, CHRIS E 4642 SOUTHERN PLACE PACE, FL 32571				00000usu7985
TITLE NAME STREET ADDRESS CITY-ST-ZIP					04/27/06-80084-022 158.75
TITLE NAME STREET ADDRESS GITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,		IN THIS SPACE		
SINEED ADDRESS CITY-ST-ZIP					
STREE NAME STREET ADDRESS					

12. Thereby certify that the information supplied with this titing does not qualify for the exemptions contained in Chapter 1.19, Florida Statutes, I further certify that the information indicated on this report or suppliemental 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 receipt of reports accepted 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 adjuress—with an other memowered.

SIGNATURE:

NO TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-24-06

X50-994-0630

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