

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # P03000143962

1. Entity Name  
EDDIE LOUIS CARPENTRY, INC.



Principal Place of Business  
327 SE OLD BELLAMY ROAD  
HIGH SPRINGS, FL 32643

Mailing Address  
P.O. BOX 1712  
HIGH SPRINGS, FL 32655

**FILED  
May 04, 2006 08:00 AM  
Secretary of State**



05022006 No Chg-P CR2E034 (11/05)

4. FEI Number 20-0458697	Applied For Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

LOUIS, CYNTHIA B  
327 SE OLD BELLAMY ROAD  
HIGH SPRINGS, FL 32643

**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 reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
Due by September 6, 2006**

9. Election Campaign Financing  
Trust Fund Contribution.



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

In accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

10.

**OFFICERS AND DIRECTORS**

TITLE	D
NAME	LOUIS, EDWARD R
STREET ADDRESS	PO BOX 1712
CITY-ST-ZIP	HIGH SPRINGS, FL 32655

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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:** *Edward R. Louis*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-06 386-454-4471

Date

Daytime Phone #