2006 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P03000148903 -

1. Entity Name
HOLMES IMPROVEMENTS,INC.

Principal Place of Business	Mailing Address
2215 HOWARD LANE TAMPA, FL 33612 US	2215 HOWARD LANE TAMPA, FL 33612 US

DO NOT WRITE IN THIS SPACE

04252006   No Chg-P   CR2E034 (11/05)

4. FEI Number		Applied For
20-0524529		Not Applicable
5. Certificate of Status Desired	☐	$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HOLMES, JACK S JR.
2215 HOWARD LANE
TAMPA, FL 33612

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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 **After May 1, 2006 Fee will be $550.00**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	

10. OFFICERS AND DIRECTORS

TITLE	PS
NAME	HOLMES, JACK S JR
STREET ADDRESS	2215 HOWARD LANE
CITY-ST-ZIP	TAMPA, FL 33612
TITLE	VPT
NAME	HOLMES, MELISSA
STREET ADDRESS	2215 HOWARD LANE
CITY-ST-ZIP	TAMPA, FL 33612
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/10/06-80087-024 150.00

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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: _Melissa Holmes Melissa Holmes Vice President_ 4/25/06 (813) 933 6349
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #