## 2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P03000155433

Entity Name: FRSKINE CONSTRUCTION & TRIM INC

FILED Nov 15, 2005 Secretary of State

Entity Nar	me: ERSKINE	ECONSTRUCTION & TRIM, INC	J.			
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
320 E WEI APOPKA,						
Current Mailing Address:			New Mailing Address:			
320 E WEI APOPKA,						
FEI Number:	: 84-1631859	FEI Number Applied For()	FEI Number Not Appli	icable ( ) Certificate of Status Desired ( )		
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
ERSKINE, 320 E WEI APOPKA,	LCH RD	JS				
	named entity e of Florida.	submits this statement for the pu	ırpose of changing it	s registered office or registered agent, or both,		
SIGNATUR	RE:					
	Electro	nic Signature of Registered Ager	nt	Date		
OFFICERS	S AND DIREC	TORS:	ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P ( ERSKINE, CAF 320 E WELCH APOPKA, FL 3	RD	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	S/T ( ERSKINE, WIL 320 E. WELCH APOPKA, F 32	IRD	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	(	) Delete	Title: Name: Address: Citv-St-Zip:	VP () Change (X) Addition SWINDERMAN, ANDREW S 320 E. WELCH RD APOPKA, FL 32712		

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.

SIGNATURE: CARL R. ERSKINE P 11/15/2005