

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000156285

Entity Name: MIKE'S MAINTENANCE UNLIMITED INC

FILED  
Apr 28, 2006  
Secretary of State

## Current Principal Place of Business:

2810 NEEDLE PALM DR  
EDGEWATER, FL 32141

## New Principal Place of Business:

1819 N. PINEDALE ROAD  
EDGEWATER, FL 32132

## Current Mailing Address:

2810 NEEDLE PALM DR  
EDGEWATER, FL 32141

## New Mailing Address:

PO BOX 588  
EDGEWATER, FL 32132

FEI Number: 20-0505489

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ALOISE, MICHAEL J  
2810 NEEDLE PALM DR  
EDGEWATER, FL 32141 US

## Name and Address of New Registered Agent:

ALOISE, MICHAEL J  
1819 N. PINEDALE ROAD  
EDGEWATER, FL 32132 US

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.

SIGNATURE:

04/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ALOISE, MICHAEL J  
Address: 2810 NEEDLE PALM DR  
City-St-Zip: EDGEWATER, FL 32141

Title: VST ( ) Delete  
Name: ALOISE, VICKI G  
Address: 2810 NEEDLE PALM DR  
City-St-Zip: EDGEWATER, FL 32141

Title: V ( ) Delete  
Name: LIMOGES, DONALD J  
Address: 2810 NEEDLE PALM DR  
City-St-Zip: EDGEWATER, FL 32141

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ALOISE, MICHAEL J  
Address: PO BOX 588  
City-St-Zip: EDGEWATER, FL 32132

Title: VST (X) Change ( ) Addition  
Name: ALOISE, VICKI G  
Address: PO BOX 588  
City-St-Zip: EDGEWATER, FL 32132

Title: V (X) Change ( ) Addition  
Name: LIMOGES, DONALD J  
Address: 2814 NEEDLE PALM DR  
City-St-Zip: EDGEWATER, FL 32141

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: VICKI G. ALOISE

VST

04/28/2006

Electronic Signature of Signing Officer or Director

Date