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ANNUAL REPORT				Secretary of State			
DOCUMENT # P03000157306				Secre	iai y O	1 State	
1. Entity Name LARRY D. GREGORY CREATIVE HOME REPAIR, INC.							
Principal Place of Business 3020 W. ELMONT RD. AVON PARK, FL 33825	Mailing Address 3020 W. ELMONT RD. AVON PARK, FL 33825		1.111((14)	HF REFORD THEN REN'T BESIN DR	**** **** * **** ** ***		
DO NOT WR	.CE	92132096 4. FEI Numb 20-045	No Chg-P	CR2E03	4 (11/05) Applied For Not Applicate 8.75 Additional se Required		
6. Name and Address of Current Registered Agent BENNETT, KARLA RENE'E 1104 W. PLEASANT STREET AVON PARK, FL 33825				NOT W			
the obligations of registered agent. SIGNATURE	ement for the purpose of changing its registe			oth, in the State of Flo		miliar with, and accep	
FILE NOWILL FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Figure 1: Trust Fund Contribution		ed Agent signature required Inding \$5.	00 May Be		DATE		
10. OFFICE INTLE NAME SIREE ADDRESS CITY-ST-ZIP INTLE NAME STREET ADDRESS CITY-ST-ZIP	AS AND DIRECTORS			HIDAG 03/25/06 NOT W	/RITE	008 150 .00	
CITY-ST-ZIP		1					

12. Thereby 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 cath; 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: .

NAME STREET ADDRESS CITY-ST-ZEP

SIGNATURE AND TYPED OFFICINTED NAME OF SIGNING OFFICER OR DIRECTOR