

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000157772

FILED  
Feb 14, 2006  
Secretary of State

Entity Name: ALL TRADES RESTORATION OF SW FLORIDA, INC.

## Current Principal Place of Business:

17050 ALICO COMMERCE CT #5  
FT MYERS, FL 33912

## New Principal Place of Business:

## Current Mailing Address:

17050 ALICO COMMERCE CT #5  
FT MYERS, FL 33912

## New Mailing Address:

FEI Number: 56-2425545

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GORDON, ROBERT  
C/O GULF COAST RESTORATION  
17050 ALICO COMMERCE CT #5  
FT MYERS, FL 33912 US

## Name and Address of New Registered Agent:

GORDON, ROBERT MR.  
C/O GULF COAST RESTORATION  
17050 ALICO COMMERCE CT #5  
FT MYERS, FL 33912 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: ROBERT GORDON

02/14/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: GORDON, MELINDA  
Address: 17050 ALICO COMMERCE CT #5  
City-St-Zip: FT MYERS, FL 33912

Title: D ( ) Delete  
Name: GORDON, ROBERT  
Address: 17050 ALICO COMMERCE CT #5  
City-St-Zip: FT MYERS, FL 33912

Title: VP ( ) Delete  
Name: WHITE, KEVIN  
Address: 11360 LAKE CYPRESS LOOP  
City-St-Zip: FT MYERS, FL 33912

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MRS (X) Change ( ) Addition  
Name: GORDON, MELINDA  
Address: 17050 ALICO COMMERCE CT #5  
City-St-Zip: FT MYERS, FL 33912

Title: D (X) Change ( ) Addition  
Name: GORDON, ROBERT MR  
Address: 17050 ALICO COMMERCE CT #5  
City-St-Zip: FT MYERS, FL 33912

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: KEVIN WHITE

VP

02/14/2006

Electronic Signature of Signing Officer or Director

Date