

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000157846

FILED
Sep 01, 2005
Secretary of State

Entity Name: PENSACOLA HOME REMODELING, INC.

Current Principal Place of Business:

4531 SUNRISE DR
PACE, FL 32571

New Principal Place of Business:

716 ALPINE DR.
PENSACOLA, FL 32503

Current Mailing Address:

4531 SUNRISE DR
PACE, FL 32571

New Mailing Address:

716 ALPINE DR.
PENSACOLA, FL 32503

FEI Number: 56-2424878

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WILSON, CHARLES R JR
Address: 4531 SUNRISE DR
City-St-Zip: PACE, FL 32571

Title: V () Delete
Name: WRIGHT, SUSAN M
Address: 4531 SUNRISE DR
City-St-Zip: PACE, FL 32571

Title: S () Delete
Name: DYSON, IRA M
Address: 4531 SUNRISE DR
City-St-Zip: PACE, FL 32571

Title: T (X) Delete
Name: BLACKWELL, PHILLIP T
Address: 4531 SUNRISE DR
City-St-Zip: PACE, FL 32571

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WILSON, CHARLES R JR
Address: 716 ALPINE DR.
City-St-Zip: PENSACOLA, FL 32503

Title: V (X) Change () Addition
Name: WRIGHT, SUSAN M
Address: 716 ALPINE DR.
City-St-Zip: PENSACOLA, FL 32503

Title: S (X) Change () Addition
Name: LUCAS, ROBERT D
Address: 716 ALPINE DR.
City-St-Zip: PENSACOLA, FL 32503

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 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: CHARLES R. WILSON JR.

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09/01/2005

Electronic Signature of Signing Officer or Director

Date