2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2006 8:00 am
Secretary of State
02-15-2006 90045 031 ***150.00

1. Entity Name MATTINGLY HOME IMPROVEMENTS, INC.				
Principal Plac	e of Business	Mailing Address		66003681
2389 31ST STREET NW		2389 31ST STREET NV	v	0000000
a=		WINTER HAVEN, FL 33		; *
2. Principal Place of Business 3		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4
		Solie, Apr. W. alc.		01272006 Chg-P CR2E034 (11/05)
City & State		City & State	····	4. FEI Number Applied For
				75-3141166 Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional
				Fee Required
	6. Name and Address of Curren	t Registered Agent	Ne	7. Name and Address of New Registered Agent
MATTINGLY, TERRY			Name	1
2389 31ST STREET NW			Street Address	(P.O. Box Number is Not Acceptable)
WINTER HAVEN, FL 33881			<u> </u>	
			City	FL Zip Code
8. The above	named entity submits this statement	or the purpose of chancion its	registered office or registe	ved agent, or both, in the State of Florida. I am familiar with, and accept
the obligat	ions of registered agent.			su agont, or assist, in the death of Foliate. Fairt latitude with, and occupy
SIGNATURE.	_			
Sicritations.	Signature, typed or printed name of registered ager	4 and title if applicable. (NOT)	Registered Agent eignsture require	d when reinstating) . CATE
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FIL	E NOW!!! FEE IS \$150.00	9. Election Campai		.00 May Bo
After Ma	ay 1, 2008 Fee will be \$550	.go Trust Fund Cont	ribution. 🔲 Add	ted to Fees
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
IIILE	P	Oelete	LUTE	Change Addition
NAME	MATTINGLY, TERRY		NAME	
STREET ADDRESS			STREET ADORESS	
CITY-ST-ZIF	WINTER HAVEN, FL 33881		CITY-ST-ZIP	
TULE		Delete	भार	☐ Change ☐ Addition
NAME CTRCTT +000FC0			NAME	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS	
			CITY-ST-ZIP	
TITLE .	,	☐ Delate	TITLE NAME	☐ Change ☐ Addition
STREET ADDRESS	-		NAME STREET ADDRESS	
CITY-ST-ZIP	123		CITY-ST-ZIP	
TITLE		☐ Oelete	INL	☐ Change ☐ Addition.
NAME			MAME	المان
STREET ADDRESS			STREET ADDRESS	
CITY-S1-ZIP	·		CITY-ST-ZIP	
TITLE		☐ Delete	TITLE	Change Addition
NAME PIRET (DOMESE			KAME	
STREET ADDRESS -			STREET ADDRESS CITY-ST-ZIP	
TITLE .		Delete	TITLE NAME	☐ Change ☐ Addition
		· · · · · · · · · · · · · · · · · · ·	STREET ADDRESS	• • • • • • • • • • • • • • • • • • • •
STREET ADDRESS	l• .			
,			CITY-ST-ZIP	•
STREET ADDRESS CITY-ST-ZIP	certify that the information supplied wi	h this filing does not ownite to	_8,	d in Chanter 119. Florida Statutes. I further cartify that the information
STREET ADDRESS CITY-ST-ZIP 12. I hereby a indicated	on this report or supplemental report	is true and accurate and that n	r the exemptions contained by signature shall have the	d in Chapter 119, Florida Statutes. I further certify that the information same legal effect as if made under ceth; that I am an officer or director -7. Florida Stander: and that my news expesse in Block 10 or Block 11 if
STREET ADDRESS CITY-ST-ZIP 12. I hereby a indicated of the cor	on this report or supplemental report	is true and accurate and that no cowered to execute this report	r the exemptions contained by signature shall have the as required by Chapter 607	d in Chapter 119, Florida Statutes. I further certify that the information same legal affect as if made under oath; that I am an officer or director 7, Florida Statutes; and that my name appears in Block 10 or Block 11 if
STREET ADDRESS CITY-ST-ZIP 12. I hereby a indicated of the cor changed.	on this report or supplemental report poration or the receiver or trustee empty, or on an attachment with an address	is true and accurate and that no cowered to execute this report	r the exemptions contained by signature shall have the as required by Chapter 607	same legal effect as if made under oath; that I am an officer or director - I
STREET ADDRESS CITY-ST-ZIP 12. I hereby a indicated of the cor	on this report or supplemental report poration or the receiver or trustee empty, or on an attachment with an address	is true and accurate and that no cowered to execute this report	r the exemptions contained ny signature shall have the as required by Chapter 607	same legal effect as if made under oath; that I am an officer or director - I