

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 14, 2005 8:00 am
Secretary of State

07-28-2005 90003 020 ***150.00

66027325



DOCUMENT # P04000004650 1. Entity Name RICKS MOBILE HOME IMPROVEMENTS INC.					
Principal Place of Business 5601 3RD AVE UNIT 1 KEY WEST, FL 33040-6033			Mailing Address 5601 3RD AVE UNIT 1 KEY WEST, FL 33040-6033		
2. Principal Place of Business		3. Mailing Address 55 Boca Chica Rd Lot #21, Seaside			
Suite, Apt. #, etc.		Suite, Apt. #, etc. Key West FL			
City & State		City & State Key West FL		4. FEI Number 65-0532107	
Zip		Country 33040 Monroe		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ERDMAN, RICHARD F 55 BOCA CHICA RD., LOT 21 KEY WEST, FL 33040			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Richard F Erdman</i></u> 7/20/05 <small>(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing))</small>					
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD ERDMAN, RICHARD F 55 BOCA CHICA RD., LOT 21 KEY WEST, FL 33040 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VS KIRKPATRICK, CHERYL M 55 BOCA CHICA RD., LOT 21 KEY WEST, FL 33040 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Richard F Erdman</i></u> <small>(Signature and typed or printed name of signing officer or director)</small>			Date: <u>9/10/05</u>		Daytime Phone #: <u>797-5393</u>