

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000020728

FILED  
Jan 03, 2008  
Secretary of State

Entity Name: MAINE-LY HOME IMPROVEMENTS, INC.

## Current Principal Place of Business:

706 JEREMY DRIVE  
DAVENPORT, FL 33836 US

## New Principal Place of Business:

## Current Mailing Address:

706 JEREMY DRIVE  
DAVENPORT, FL 33836 US

## New Mailing Address:

FEI Number: 34-1985286      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEVESQUE, ROBERT M SR.  
706 JEREMY DRIVE  
DAVENPORT, FL 33836 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: LEVESQUE, ROBERT M SR.  
Address: 706 JEREMY DRIVE  
City-St-Zip: DAVENPORT, FL 33836 US

Title: VP ( ) Delete  
Name: LEVESQUE, BOJON  
Address: 9 PALM CT.  
City-St-Zip: DAVENPORT, FL 33837 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SEC ( ) Change (X) Addition  
Name: EPPERSON, ANDY B  
Address: 2225 WEST HOLDEN #304  
City-St-Zip: ORLANDO, FL 32839 US

I hereby certify that the information supplied with this filing does not qualify 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: BOJON LEVESQUE

VP

01/03/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date