2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2006 8:00 am
Secretary of State
04-06-2006 90027 037 ***150.00

DOCUMENT # P04000032447

1. Entity Name
MAJESTIC FENCE INC

Principal Place of Business	Mailing Address
5348 MAJESIC CT CAPE CORAL, FL 33904	5348 MAJESIC CT CAPE CORAL, FL 33904

000037O4

03132006 Chg-P CR2E034 (11/05)

2. Principal Place of Business	3. Mailing Address
127 SW 56TH TERRACE	127 SW 56TH TERRACE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: CAPE CORAL, FLORIDA	City & State: CAPE CORAL, FLORIDA
Zip: 33914 Country: USA	Zip: 33914 Country: USA

4. FEI Number: 80-0085755 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

LAUMAN, LARRY A
5348 MAJESTIC COURT
CAPE CORAL, FL 33904

7. Name and Address of New Registered Agent

Name: LARRY A. LAUMAN
Street Address (P.O. Box Number Is Not Acceptable): 127 SW 56TH TERRACE
City: CAPE CORAL **FL** Zip Code: 33914

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: Larry A. Lauman 3/18/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P LAUMAN, LARRY A 5348 MAJESTIC CT CAPE CORAL, FL 33904	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT LARRY A. LAUMAN 127 SW 56TH TERRACE CAPE CORAL, FLORIDA 33914	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP LAUMAN, LORI S 5348 MAJESTIC CT CAPE CORAL, FL 33904	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP LORI S. LAUMAN 127 SW 56TH TERRACE CAPE CORAL, FLORIDA 33914	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S LAUMAN, JENNIFER M 5348 MAJESTIC CT CAPE CORAL, FL 33904	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S JENNIFER M. LAUMAN 127 SW 56TH TERRACE CAPE CORAL, FLORIDA 33914	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T LAUMAN, RICHARD W 5348 MAJESTIC CT CAPE CORAL, FL 33904	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T RICHARD W. LAUMAN 127 SW 56TH TERRACE CAPE CORAL, FLORIDA 33914	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Larry A. Lauman 3/18/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #