


FILED

06 APR 14 AM 9:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P04000041637 1. Entity Name JOSEPH E. HOOD, INC.	
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Principal Place of Business 1833 SHORE ACRES BLVD NE ST PETERSBURG FL 33703	Mailing Address 1833 SHORE ACRES BLVD NE ST PETERSBURG FL 33703
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DO NOT WRITE IN THIS SPACE



01202006 No Chg-P CR2E034 (11/05)

4. FEI Number 27-0081916	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent HOOD, JOSEPH E 1833 SHORE ACRES BLVD N E ST PETERSBURG, FL 33703

**DO NOT WRITE
IN THIS SPACE**

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 _____
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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOOD, JOSEPH E 1833 SHORE ACRES BLVD N E ST PETERSBURG, FL 33703
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05/04/06--01015--029 **150.00

**DO NOT WRITE
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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: <u>Joseph Earl Hood</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<u>4/7/06</u> <small>Date</small>	<u>727-526-2446</u> <small>Daytime Phone #</small>
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