

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000057687

Entity Name: FANNIN FRAMING, INC.

FILED
Mar 30, 2005
Secretary of State

Current Principal Place of Business:

309 TEMPLE CT
WINTER HAVEN, FL 33880

New Principal Place of Business:

27 LOUISIANA AVE
SAINT CLOUD, FL 34769

Current Mailing Address:

309 TEMPLE CT
WINTER HAVEN, FL 33880

New Mailing Address:

10690 JIM EDWARDS ROAD
HAINES CITY, FL 33844

FEI Number: 45-0538363

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PIPPEN, JOSEPH F JR
10225 ULMERTON RD
BLDG 11
LARGO, FL 33771 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: P () Delete
Name: FANNIN, ROBERT
Address: 309 TEMPLE CT
City-St-Zip: WINTER HAVEN, FL 33880

Title: V (X) Delete
Name: SCHUBERT, WILLIAM
Address: 309 TEMPLE CT
City-St-Zip: WINTER HAVEN, FL 33880

Title: S (X) Delete
Name: CLAIR, JASON
Address: 309 TEMPLE CT
City-St-Zip: WINTER HAVEN, FL 33880

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SCHUBERT, WILLIAM
Address: 27 LOUISIANA AVE
City-St-Zip: SAINT CLOUD, FL 34769

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: WILLIAM SCHUBERT

P

03/30/2005

Electronic Signature of Signing Officer or Director

Date