2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2006
Secretary of State

DOCUMENT# P04000060982

Entity Name: MCENIRY INSTALLATIONS INC.

Current Principal Place of Business:

9024 COCKLES AVE
PORT ST JOE, FL 32456 US

New Principal Place of Business:

254 PINEDA STREET
PORT ST JOE, FL 32456 US

Current Mailing Address:

9024 COCKLES AVE
PORT ST JOE, FL 32456 US

New Mailing Address:

254 PINEDA STREET
PORT ST JOE, FL 32456 US

FEI Number: 20-0983414 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCENIRY, THOMAS E 3
9024 COCKLES AVE
PORT ST JOE, FL 32456 US

Name and Address of New Registered Agent:

MCENIRY, THOMAS E 3
254 PINEDA STREET
PORT ST JOE, FL 32456 US

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: THOMAS E MCENIRY 02/28/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: MCENIRY, THOMAS E 3
Address: 9024 COCKLES AVE
City-St-Zip: PORT ST JOE, FL 32456 US

Title: VP ( ) Delete
Name: MCENIRY, CHRISTINE L
Address: 9024 COCKLES AVE
City-St-Zip: PORT ST JOE, FL 32456 FL

Title: VP ( ) Delete
Name: BRAMMER, HOBERT N
Address: 412 REDFISH STREET
City-St-Zip: PORT ST JOE, FL 32456

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: MCENIRY, THOMAS E 3
Address: 254 PINEDA STREET
City-St-Zip: PORT ST JOE, FL 32456 US

Title: VP (X) Change ( ) Addition
Name: MCENIRY, CHRISTINE L
Address: 254 PINEDA STREET
City-St-Zip: PORT ST JOE, FL 32456 FL

Title: VP (X) Change ( ) Addition
Name: BRAMMER, HOBERT N
Address: 426 REDFISH STREET
City-St-Zip: PORT ST JOE, FL 32456

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS E MCENIRY PRES 02/28/2006
Electronic Signature of Signing Officer or Director Date