

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000091818

FILED
Apr 13, 2005
Secretary of State

Entity Name: TRIM TIGHT CARPENTRY, INC.

Current Principal Place of Business:

2991 SHEARWATER DR
NAVARRE, FL 32566

New Principal Place of Business:

Current Mailing Address:

2991 SHEARWATER DR
NAVARRE, FL 32566

New Mailing Address:

FEI Number: 05-0605158

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALDRON, BRYANT
2991 SHEARWATER DR
NAVARRE, FL 32566 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: D () Delete
Name: WALDRON, BRYANT
Address: 2991 SHEARWATER DR
City-St-Zip: NAVARRE, FL 32566

Title: D () Delete
Name: WALDRON, RYAN
Address: 2991 SHEARWATER DR
City-St-Zip: NAVARRE, FL 32566

Title: D () Delete
Name: ZIMMERLY, ANDREW
Address: 2053 BURJONIK LN
City-St-Zip: NAVARRE, FL 32566

Title: D () Delete
Name: SCOTT, ANDREW
Address: 139 JET DRIVE
City-St-Zip: FORT WALTON BEACH, FL 32548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: BRYANT L. WALDRON

D

04/13/2005

Electronic Signature of Signing Officer or Director

Date