


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 17, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000094913	
1. Entity Name MAXWELL BUILDERS, INC.	

Principal Place of Business 1406 ALDEN STREET DELAND, FL 32720 US	Mailing Address 1406 ALDEN STREET DELAND, FL 32720 US
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DO NOT WRITE IN THIS SPACE



07102006 No Chg-P CR2E034 (11/05)

4. FEI Number 20-1276144	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MAXWELL, MICHAEL L
1406 ALDEN STREET
DELAND, FL 32720

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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.

U00000571010
07/18/06-80020-006 150.00

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MAXWELL, MICHAEL L 1406 ALDEN STREET DELAND, FL 32720
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MAXWELL, DEBORAH B 1406 ALDEN STREET DELAND, FL 32720
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MAXWELL, JACQUELINE E 1406 ALDEN STREET DELAND, FL 32720
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MAXWELL, JOSEPH M 1406 ALDEN STREET DELAND, FL 32720
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 lines empowered.

SIGNATURE: Michael L. Maxwell 7-14-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #