

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2006 8:00 am
Secretary of State

03-03-2006 90103 049 ***150.00

DOCUMENT # P04000116189

1. Entity Name
TRIM TEAM INC.



Principal Place of Business
**535 EAST IRIS DRIVE
ORANGE CITY, FL 32763**

Mailing Address
**535 EAST IRIS DRIVE
ORANGE CITY, FL 32763**

2. Principal Place of Business
525 E. Iris Dr
Suite, Apt. #, etc.

3. Mailing Address
525 E. Iris Dr.
Suite, Apt. #, etc.

City & State
Orange City FL
Zip **32763** Country

City & State
Orange City FL
Zip **32763** Country

01272006 Chg-P CR2E034 (11/05)

4. FEI Number
20-1470990 Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MCNICOL, STEVEN E
535 EAST IRIS DRIVE
ORANGE CITY, FL 32763**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
525 E. Iris Dr.
City **Orange City** FL Zip Code **32763**

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 *Steven E. McNicol*
Signature, typed or printed name of registered agent and title if applicable.

Steven E. McNicol

1/27/06

(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. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME **P,S** ☐ Delete
STREET ADDRESS **MCNICOL, STEVEN E**
CITY-ST-ZIP **535 EAST IRIS DRIVE
ORANGE CITY, FL 32763**

TITLE
NAME **VP,T** ☒ Delete
STREET ADDRESS **DUNDON, DANIEL L**
CITY-ST-ZIP **535 EAST IRIS DRIVE
ORANGE CITY, FL 32763**

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME **McNicol, Steven E.** ☒ Change ☐ Addition
STREET ADDRESS **525 E. Iris Dr.**
CITY-ST-ZIP **Orange City FL 32763**

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
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CITY-ST-ZIP

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 I have not changed, or on an attachment with an address, with all other like empowered