


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 02, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # P04000138239**  
 1. Entity Name  
**EDWARD HERCHENRODER CARPENTRY INC.**



Principal Place of Business      Mailing Address  
**2410 AVENUE B WEST**      **2410 AVENUE B WEST**  
**BRADENTON BEACH, FL 34217 US**      **BRADENTON BEACH, FL 34217 US**

**DO NOT WRITE IN THIS SPACE**



02062007    No Chg-P    CR2E034 (11/05)

4. FEI Number      Applied For  
**20-1709471**      Not Applicable

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

6. Name and Address of Current Registered Agent  
**HERCHENRODER, EDWARD J**  
**2410 AVENUE B WEST**  
**BRADENTON BEACH, FL 34217**

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ 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**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.        **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	HERCHENRODER, EDWARD J
STREET ADDRESS	2410 AVENUE B WEST
CITY-ST-ZIP	BRADENTON BEACH, FL 34217
TITLE	VP
NAME	SCHRANER, JEFFREY J JR
STREET ADDRESS	2410 AVENUE B WEST
CITY-ST-ZIP	BRADENTON, FL 34217
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

000000624791  
 04/06/07-80045-024 150.00

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 like empowered.

**SIGNATURE:**  **Edward J. Herchenroder**      **516-647-8205**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #