## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000140219

Entity Name: M&M CARPENTRY OF SARASOTA, INC.

FILED Jun 27, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

 4448 NELSON AVE
 3319 SHAMROCK DR.

 SARASOTA, F 34231
 VENICE, F 34293

Current Mailing Address: New Mailing Address:

4448 NELSON AVE 3319 SHAMROCK DR. SARASOTA, F 34231 VENICE, FL 34293

FEI Number: 20-1726557 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MCROBB, NORMAN
4448 NELSON AVE
SARASOTA, FL 34231 US

MCROBB, NORMAN
3319 SHAMROCK DR.
VENICE, FL 34293 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: NORMAN MCROBB 06/27/2006

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P () Delete
 Title:
 P (X) Change () Addition

 Name:
 MCROBB, NORMAN
 Name:
 MCROBB, NORMAN

 Address:
 4448 NELSON AVE
 Address:
 3319 SHAMROCK DR.

Address: 4448 NELSON AVE Address: 3319 SHAMROCK DI
City-St-Zip: SARASOTA, FL 34231 City-St-Zip: VENICE, FL 34293

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition Name: MONOGHAN, TERRY Name: MONAGHAN, TERRY

Address: 3319 SHAMROCK DRIVE Address: 3319 SHAMROCK DRIVE City-St-Zip: VENICE, FL 34293 City-St-Zip: VENICE, FL 34293

Title: ( ) Delete Title: T ( ) Change (X) Addition

 Name:
 Name:
 HANSEN, DANIEL A

 Address:
 Address:
 185 AURORA RD.

 City-St-Zip:
 City-St-Zip:
 VENICE, FL 34293

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: NORMAN MCROBB P 06/27/2006