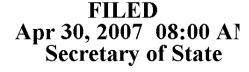
## 2007 FOR PROFIT CORPORATION

DO NOT WRITE IN THIS SPACE

## **ANNUAL REPORT** DOCUMENT # P04000152077 1. Entity Name DAN'S PROFESSIONAL CARPENTRY INC.





Principal Place of Business

117 LITTLE HEWITT LANE INTERLACHEN, FL 32148 Mailing Address

117 LITTLE HEWITT LANE INTERLACHEN, FL 32148



01272007

No Chg-P

CR2E034 (11/05)

4. FEI Number 20-1856978

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

MARVONEK, DANNY W 117 LITTLE HEWITT LANE INTERLACHEN, FL 32148

## DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the plans of registered agent.	ourpose of changing its registered	d office or re	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept	
SIGNATURE_	Signature, typed or printed name of registered agent and title	of applicable (NOTE Registered	Agent signature	required when reinstating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.  Added to Fees		\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MARVONEK, DANNY W 117 LITTLE HEWITT LANE INTERLACHEN, FL 32148				U00000741835 05/15/07-80045-023 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	DO NOT WRITE	
NAME STREET ADDRESS CITY-ST-ZIP			:	IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE					•	

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:

NAME STREET ADDRESS CITY-ST-ZIP

4-27-07