2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000028109

Title:

Name:

Address:

City-St-Zip:

Entity Name: RADFORD FRAMING INC.

FILED Feb 22, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 31 MAGNOLIA AVE ORMOND BEACH, FL 32174 US **Current Mailing Address: New Mailing Address:** 31 MAGNOLIA AVE ORMOND BEACH, FL 32174 US FEI Number: 20-2375661 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: RADFORD, MITCHELL 31 MAGNOLIA AVE ORMOND BEACH, FL 32174 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition RADFORD, MITCHELL RADFORD, MITCHELL Name: Name: 31 MAGNOLIA AVE 31 MAGNOLIA AVE Address: Address: City-St-Zip: ORMOND BEACH, FL 32174 City-St-Zip: ORMOND BEACH, FL 32174 US Title: VΡ Title: () Delete (X) Change () Addition Name: BISBEE, ERIC Name: TROTT, KELLY 429 AUBURN DR 1315 CONTINENTAL DRIVE Address: Address: DAYTONA BEACH, FL 32118 DAYTONA BEACH, FL 32117 US City-St-Zip: City-St-Zip: Title: (X) Delete Title: () Change () Addition RADFORD, MICHELLE Name: Name: 31 MAGNOLIA AVE Address: Address: City-St-Zip: ORMOND BEACH, FL 32174 City-St-Zip:

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: MITCHELL RADFORD **PVS** 02/22/2006

(X) Delete

ORMOND BEACH, FL 32174

STINSON, JASON

31 MAGNOLIA AVE

() Change () Addition