

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000034403

FILED  
Jul 10, 2006  
Secretary of State

Entity Name: CARPENTER & SONS FENCE AND HANDYMAN, INC.

## Current Principal Place of Business:

8339 TOLEDO ST  
NAVARRE, FL 325669363

## New Principal Place of Business:

2209 SALAMANCA ST  
NAVARRE, FL 32566

## Current Mailing Address:

8339 TOLEDO ST  
NAVARRE, FL 325669363

## New Mailing Address:

2209 SALAMANCA ST  
NAVARRE, FL 32566

FEI Number: 26-0108287

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FOSTER, GERALD  
8339 TOLEDO ST  
NAVARRE, FL 325669363 US

## Name and Address of New Registered Agent:

FOSTER, GERALD  
2209 SALAMANCA ST  
NAVARRE, FL 32566 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: GERALD FOSTER

07/10/2006

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:

Title: DT ( ) Delete  
Name: FOSTER, GERALD  
Address: 8339 TOLEDO ST  
City-St-Zip: NAVARRE, FL 325669363

Title: P ( ) Delete  
Name: BASS, BRAD  
Address: 8339 TOLEDO ST  
City-St-Zip: NAVARRE, FL 325669363

Title: S ( ) Delete  
Name: PITMAN, BRITNEY  
Address: 8339 TOLEDO ST  
City-St-Zip: NAVARRE, FL 325669363

Title: V (X) Delete  
Name: LYNN N, JAMESON  
Address: 8339 TOLEDO ST  
City-St-Zip: NAVARRE, FL 325669363

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change ( ) Addition  
Name: FOSTER, GERALD  
Address: 2209 SALAMANCA ST  
City-St-Zip: NAVARRE, FL 32566

Title: P (X) Change ( ) Addition  
Name: FOSTER, STEVE  
Address: 2209 SALAMANCA ST  
City-St-Zip: NAVARRE, FL 325669363

Title: S (X) Change ( ) Addition  
Name: PITMAN, BRITNEY  
Address: 8340 TOLEDO ST  
City-St-Zip: NAVARRE, FL 32566

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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.

SIGNATURE: GERALD FOSTER

DT

07/10/2006

Electronic Signature of Signing Officer or Director

Date