

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000061576

FILED
Apr 30, 2006
Secretary of State

Entity Name: BROTHERS WATERPROOFING, INC.

Current Principal Place of Business:

2553 SUNSET DRIVE
CRESTVIEW, FL 32536

New Principal Place of Business:

641 BIRKDALE CIRCLE E.
NICEVILLE, FL 32578 US

Current Mailing Address:

2553 SUNSET DRIVE
CRESTVIEW, FL 32536

New Mailing Address:

641 BIRKDALE CIRCLE E.
NICEVILLE, FL 32578 US

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUEEN, JODY A
2553 SUNSET DRIVE
CRESTVIEW, FL 32536 US

Name and Address of New Registered Agent:

QUEEN, JODY A
641 BIRKDALE CIRCLE
NICEVILLE, FL 32578 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: JODY A. QUEEN

04/30/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: QUEEN, JODY A
Address: 2553 SUNSET DRIVE
City-St-Zip: CRESTVIEW, FL 32536

Title: VPD () Delete
Name: QUEEN, DOLIVER K
Address: 2553 SUNSET DRIVE
City-St-Zip: CRESTVIEW, FL 32536

Title: STD () Delete
Name: QUEEN, AARON D
Address: 2553 SUNSET DRIVE
City-St-Zip: CRESTVIEW, FL 32536

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: QUEEN, JODY A
Address: 641 BIRKDALE CIRCLE
City-St-Zip: NICEVILLE, FL 32578 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JODY A QUEEN

PD

04/30/2006

Electronic Signature of Signing Officer or Director

Date