## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 28, 2006 8:00 am Secretary of State

DOCUMENT # P05000109590  1. Entity Name KEHOE HOME IMPROVEMENTS INC.						04-28-2006 9	00191 023 ***150	).00	
Principal Place 134 ELIAM RI MELROSE, FL	D.	Mailing Address 134 ELIAM RD. MELROSE, FL 32666	JS	:			50017204		
	ace of Business  BROOKLYN BRY RD  #, etc.	3. Mailing Address 6 596 BROOK Suite, Apt. #, etc.	LYW BAY	R)	04172006	Chg-P	CR2E034 (11/05)		
City & State KEYSTO Zip 32656	UE HEIGHTS FL.	City & State  KEYSTONE HEIG  Zip  32656	HTS Country	FL		503931 f Status Desired	<del>                                      </del>		
CASSE	6. Name and Address of Current F				7. Name and	ddress of New Re	<del></del>		
			Name	12.2.11					
KEHOE, KEVIN KEITH 134 ELIAM RD. MELROSE, FL 32666				Street Address (P.O. Box Number is Not Acceptable) 6596 BROOKLYN BRY RD					
			City 1/2	EYSTO	11 × 10	EIGHTS	FL Zig Cood	56	
	named entity submits this statement for ons of registered agent.	the purpose of changing its reg					786		
SIGNATURE.	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: Re	gistered Agent signati	ure required w	hen reinstating)		DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.0	9. Election Campaign Trust Fund Contribu			0 May Be I to Fees				
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/	CHANGES TO OFFI	ICERS AND DIRECTOR		
TITLE	P	☐ Detete	TITLE			٠.	Change	Addition	
NAME	KEHOE, KEVIN KEITH 134 ELIAM RD.		NAME STREET ADDRESS	1,59	1 BRO	OKLYN B	AY RD.		
STREET ADDRESS CITY-ST-ZIP	MELROSE, FL 32666	•	CITY-ST-ZIP				FL 320	9	
TITLE	MELITOCE, LE GEOGG	☐ Delete	TITLE	1 /	410102	1161114	☐ Change	☐ Addition	
NAME		C) Delete .	NAME						
STREET ADORESS			STREET ADORESS						
CITY-ST-ZIP			CITY-ST-ZIP						
TITLE		☐ Delete	TITLE				Change	Addition	
NAME			HAME						
STREET ADDRESS			STREET ADDRESS CITY-ST-ZIP						
CITY-ST-ZIP							☐ Change	Addition	
TITLE NAME		☐ Delete	TITLE NAME					L. Addition	
STREET ADDRESS			STREET ADORESS	ĺ					
CITY-ST-ZIP	ļ		CITY-ST-ZIP						
THILE		☐ Delete	TITLE				☐ Change	☐ Addition	
NAME			NAME						
STREET ADORESS			STREET ADORESS CITY-ST-ZIP						
CITY-ST-ZIP				-		. ,		- Augusta	
TITLE		☐ Delete	TITLE				☐ Change	☐ Addition	
NAME Street Address	1		NAME STREET ADDRESS						
CITY-ST-ZIP	1		CITY-ST-ZIP						

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. SIGNATURE AND TYPED OF FRIED TO NAME OF STANKS OFFICER OR DIRECTOR

04.24.06 (352)235-6507

## **ATTACHMENT**

2006 FOR PROFIT CORPORATION ANNUAL REPORT

1. Entity Nam	MENT # P05000109							
134 ELIAM F MELROSE, F	£ 32666 US		nz	50017	204			
	Pace of Business  BROOKLYN BAY RO #, etc.	3. Mailing Address 6 596 BROOK Suite, Apt. #, etc.	LYW BAY R		R2E034 (11/05)			
City & Stat KEYSTO Zip 32656	WE HEIGHTS FL Country	City & State  KEYSTONE HEIG  Zip  32656	SHTS FL Country	4. FEI Number  20 - 3503931  5. Certificate of Status Desired □	Applied For Not Applicable \$8.75 Additional Fee Required			
	6. Name and Address of Current F	Registered Agent	Name	7. Name and Address of New Registe	red Agent			
134 ELIAN	EVIN KEITH 1 RD. E, FL 32666			Street Address (P.O. Box Number is Not Acceptable) 6596 BROOKLYN BRY RD				
			City		EE∎ Zip Code			
8. The above	named entity submits this statement for	the purpose of changing its reg	istered office or regis	TONE HEIGHTS stered agent, or both, in the State of Florida.	FL Zip Code 3.26.56 am familiar with, and accept			
the obligat	tions of registered agent.				an tarmina with allo accord			
SIGNATURE.	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE: Re	gistered Agent signature requ	ired when reinstating)	ATE			
	E NOWIII FEE IS \$150.00 ay 1, 2006 Fee will be \$550.0		tion.	5.00 May 8e dded to Fees				
TITLE	P	Delete	11. TILE	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 11  Z Change Addition			
NAME STREET ADDRESS CITY-ST-ZIP	KEHOE, KEVIN KEITH 134 ELIAM RD.		NAME					
	MELROSE, FL 32666			596 BROOKLYN BRY				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MELROSE, FL 32666	□ Defete	CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	596 BROOKLYN BAY EYSTONE HEIGHTS				
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NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empor or on an attachment with an address, w	Delete  Delete  Delete  Delete  Delete	CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-S1-ZIP  THE NAME STREET ADDRESS CITY-S1-ZIP  THE NAME TITLE  NAME STREET ADDRESS CITY-S1-ZIP  THE NAME STREET ADDRESS CITY-S1-ZIP  THE NAME THE NAME STREET ADDRESS CITY-S1-ZIP  THE NAME THE NAME STREET ADDRESS CITY-S1-ZIP  THE NAME STREET ADDRESS CITY-S1-ZIP  THE NAME STREET ADDRESS CITY-S1-ZIP	end in Chanter 119 Florida Statutes   Surther	Change Addition  Change Addition  Change Addition  Change Addition  Change Addition			