

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 05, 2006 8:00 am
Secretary of State

05-05-2006 90162 038 ***150.00

DOCUMENT # P05000134175

1. Entity Name
NATHANIEL ELDON CARPENTRY INC.



Principal Place of Business Mailing Address
 1204 1ST STREET N 1204 1ST STREET N
 2 2
JACKSONVILLE BEACH, FL 32250 JACKSONVILLE BEACH, FL 32250

66021231



2. Principal Place of Business 3. Mailing Address
31 SANDRA DRIVE 31 SANDRA DRIVE
 Suite, Apt. #, etc. Suite, Apt. #, etc.

04252006 Chg-P CR2E034 (11/05)

City & State City & State
JACKSONVILLE BEACH, FL JACKSONVILLE BEACH, FL
 Zip Country Zip Country
32250 DUVAL 32250 DUVAL

4. FEI Number: **421679886** Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
ELDON, NATHANIEL H
 1204 1ST STREET N
 2
JACKSONVILLE BEACH, FL 32250

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
31 SANDRA DRIVE
 City **JACKSONVILLE BEACH** **FL** Zip Code **32250**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when renewing)

FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees
After May 1, 2006 Fee will be \$550.00

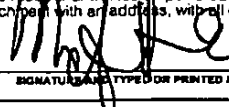
10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
P	ELDON, NATHANIEL H	1204 1ST STREET N #2	JACKSONVILLE BEACH, FL 32250	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
		31 SANDRA DRIVE	JACKSONVILLE BEACH, FL 32250	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:  Date: **4/27/06** Daytime Phone # _____