2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000017706

FILED Apr 27, 2007 8:00 am Secretary of State

04-27-2007 90182 008 ***158.75

| 1. Entity Name SOUTH SHORE FENCE & DECKS, INC. | | | | | | | | | | |
|---|--|-------------------------------|--|---------------------------------------|--|---------------------|-----------------------|------------|---------------------------|---------------------------|
| 8211 RICHMOND STREET 8 | | | Mailing Address 8211 RICHMOND STREET GIBSONTON, FL 33534 | | | 40085243 | | | | |
| Principal Place of Business - No P.O. Box # 3. Mailing Address | | | | | | | | | | |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | 04052007 | Chg-P | CR2E | 034 (12/06) | |
| City & State | | | City & State | | | 4. FEI Number | 403186 | 2 | | plied For t Applicable |
| Zip | Country | | Zip | Country | | | of Status Desired | | \$8.75 Add Fee Require | |
| 6. Name and Address of Current Registered Agent | | | | | Name | /. Name and | Address of New F | kegisterea | Agent | |
| EASTON, JAMES 8211 RICHMOND STREET GIBSONTON, FL 33534 | | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | |
| | | | City | | | • | | FI | Zip Code | э |
| the obligat | named entity submits ions of registered agei | | purpose of changing its | registered o | office or regist | tered agent, or bot | h, in the State of Fl | | | and accept |
| SIGNATURE | | | | | | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. | | | | | | | | | | |
| 10. | | OFFICERS AND DIRE | CTORS | 11, | | ADDITIONS/ | CHANGES TO OFF | FICERS AN | D DIRECTOR | S IN 11 |
| TITLE NAME STREET ADDRESS CITY ST ZIP | DPV EASTON, JAMES 8211 RICHMOND GIBSONTON, FL | Oelete TITLE NAME STREE CITY- | | DDRESS - ZIP | | | | ☐ Change | ☐ Addition | |
| NAME STREET ADDRESS CITY-ST-ZIP | TS EASTON, JAMES 8211 RICHMOND GIBSONTON, FL | | □ Delete | TITLE NAME STREET A CITY-ST- | | | | | Change | Addition |
| TITLE NAME STREET ADDRESS CITY-ST ZIP | , | | ☐ Delete | TITLE NAME STREET A | | | | | Change | ☐ Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Delete | TITLE NAME STREET A CITY-ST- | | | | | ☐ Change | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Delete | TITLE NAME STREET A CITY-ST- | | | | | ☐ Change | Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | | ☐ Delete | TITLE NAME STREET A CITY-ST- | | | | | ☐ Change | ☐ Addition |

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:

m 5 Em

James S Easton

4/24/07 813.671-0054

Daytime Phone #