## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P06000017706

1. Entity Name

SOUTH SHORE FENCE & DECKS, INC.



FILED
May 02, 2008 08:00 AN
Secretary of State

Principal Place of Business

2014 DIGITATION CENTER

8211 RICHMOND STREET GIBSONTON, FL 33534 Mailing Address

8211 RICHMOND STREET GIBSONTON, FL 33534



	DO	NOT	<b>WRITE</b>	IN	<b>THIS</b>	SPACE
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01282008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-4031862 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

EASTON, JAMES 8211 RICHMOND STREET GIBSONTON, FL 33534

## DO NOT WRITE IN THIS SPACE

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										
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00  9. Election Campaign Fina Trust Fund Contribution				5.00 May Be Added to Fees						
10.	OFFICERS AND DIREC	TORS								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPV EASTON, JAMES 8211 RICHMOND STREET GIBSONTON, FL 33534				U00000946160 05/30/08-80037-024 158.75					
TITLE NAME STREET ADDRESS CITY-SI-ZIP	TS EASTON, JAMES 8211 RICHMOND STREET GIBSONTON, FL 33534				·					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN <sup>-</sup>	THIS SPACE					
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TITLE NAME STREET ADDRESS 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:** 

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIR

S. Easton Pres 4/25/08 813-671-0