

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000056561

Entity Name: CIVIL SPECIALTIES, INC.

FILED
May 11, 2007
Secretary of State

Current Principal Place of Business:

P.O. BOX 1807
TAVARES, FL 32778

New Principal Place of Business:

4295 W OLD HWY 441
SUITE 3
MOUNT DORA, FL 32757

Current Mailing Address:

P.O. BOX 1807
TAVARES, FL 32778

New Mailing Address:

FEI Number: 20-4928868

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERRYMAN, WALTER
4295 W OLD US HWY 441
MT DORA, FL 32757 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: STRAUB, MICHAEL J
Address: P.O. BOX 1807
City-St-Zip: TAVARES, FL 32778

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL J STRAUB

D

05/11/2007

Electronic Signature of Signing Officer or Director

Date