

**2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Jul 29, 2005  
Secretary of State**

DOCUMENT# P94000022899

Entity Name: MORRIS FRAMING, INC.

**Current Principal Place of Business:**

4637 HOMESTEAD RD  
JACKSONVILLE, FL 32210

**New Principal Place of Business:**

**Current Mailing Address:**

4637 HOMESTEAD RD  
JACKSONVILLE, FL 32210

**New Mailing Address:**

FEI Number: 65-0478052      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

MORRIS, DONALD C  
4637 HOMESTEAD RD  
JACKSONVILLE, FL 32210      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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MORRIS, DONALD C  
Address: 4637 HOMESTEAD RD  
City-St-Zip: JACKSONVILLE, FL 32210

Title: V ( ) Delete  
Name: NEWSOME, KEVIN M  
Address: 2417 HIRSH AVE  
City-St-Zip: JACKSONVILLE, FL 32216

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PSD (X) Change ( ) Addition  
Name: MORRIS, DONALD C  
Address: 4637 HOMESTEAD RD  
City-St-Zip: JACKSONVILLE, FL 32210

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

Title: V ( ) Change (X) Addition  
Name: MORRIS, WESLEY J  
Address: 4637 HOMESTEAD RD  
City-St-Zip: JACKSONVILLE, FL 32210

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DONALD C MORRIS

PRES

07/29/2005

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date