


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 28, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P96000023578</b> 1. Entity Name A & C PLASTERING, INC.	
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Principal Place of Business P.O. BOX 162 MARATHON, FL 33050	Mailing Address P.O. BOX 162 MARATHON, FL 33050
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**DO NOT WRITE IN THIS SPACE**



01052006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0648683	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  HEWLETT, GAYLE 217 95TH ST OCEAN MARATHON, FL 33050
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**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 \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PO NATTA, ANTHONY P.O. BOX 1432 MARATHON, FL 33050
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P HEWLETT, GAYLE P.O. BOX 162 MARATHON, FL 33050
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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04/11/06-80101-014 150.00

**DO NOT WRITE  
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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: Gayle Hewlett 3-24-06 305/743-9813  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Office Phone #