

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000091124

FILED
Mar 28, 2006
Secretary of State

Entity Name: DVF INSTALLATION SERVICES, INC.

Current Principal Place of Business:

8900 LINDY LANE
NEW PORT RICHEY, FL 34655

New Principal Place of Business:

Current Mailing Address:

8900 LINDY LANE
NEW PORT RICHEY, FL 34655

New Mailing Address:

FEI Number: 59-3409834 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VAN FLEET, DOUG
8900 LINDY LANE
NEW PORT RICHEY, FL 34655 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VAN FLEET, DOUG
Address: 8900 LINDY LANE
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: TS () Delete
Name: VAN FLEET, PATRICIA G
Address: 8900 LINDY LANE
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: VP () Delete
Name: VAN FLEET, JAMES
Address: 8900 LINDY LANE
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: VP (X) Delete
Name: SHTYRKALO, YAROSLAV
Address: 9603 RIVER CHASE DR
City-St-Zip: NEW PORT RICHEY, FL 34655

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: PATRICIA G VAN FLEET

TS

03/28/2006

Electronic Signature of Signing Officer or Director

Date