2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P97000011034

1. Entity Name

NATIONAL GARAGE DOOR SERVICES, INC.



FILED May 01, 2006 08:00 Al Secretary of State

Principal Place of Business

5027 SOUTHAMPTON CIRCLE TAMPA, FL 33647

Mailing Address

5027 SOUTHAMPTON CIRCLE

TAMPA, FL 33647



DO NOT WRITE IN THIS SPACE

Applied For 4 FEI Number 59-3426592 Not Applicable

5. Certificate of Status Desired

04282006

\$8.75 Additional Fee Required

CR2E034 (11/05)

6. Name and Address of Current Registered Agent

CANERDAY, DIANA 5027 SOUTHAMPTON CIRCLE TAMPA, FL 33647

DO NOT WRITE IN THIS SPACE

No Chg-P

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, 2006 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.			~ ~ ~	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			-
TITLE NAME STREET AUDRESS CITY-ST-ZIP	P CANERDAY, KENNETH 5027 SOUTHAMPTON CIRCLE TAMPA, FL 33647				U00000554302 05/15/06-90086-021 150 nn
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST CANERDAY, DIANA 5027 SOUTHAMPTON CIRCLE TAMPA, FL 33647				05/15/05-80086-021 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
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 eath; 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 axaphment with an address, with all other like empowered.					