

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000027183

FILED
May 11, 2006
Secretary of State

Entity Name: IMMACULATE WINDOW COVERINGS, INC.

Current Principal Place of Business:

3788 W. COUNTY HWY. 30-A
SANTA ROSA BEACH, FL 32459 US

New Principal Place of Business:

Current Mailing Address:

3788 W. COUNTY HWY. 30-A
SANTA ROSA BEACH, FL 32459 US

New Mailing Address:

FEI Number: 59-3438724

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATTHEWS, DANA C ESQ.
607 HIGHWAY 98 EAST
DESTIN, FL 32541 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: P () Delete
Name: REYNOLDS, KELLY
Address: 252 CLUBHOUSE DRIVE W.
City-St-Zip: FREEPORT, FL 32433

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 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: KELLY REYNOLDS

PRES

05/11/2006

_____ Electronic Signature of Signing Officer or Director

_____ Date