

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000076554

FILED
Jul 07, 2006
Secretary of State

Entity Name: LOCKLIN MOBILE HOME SUPPLY AND REPAIR, INC.

Current Principal Place of Business:

3518 NW 10TH AVE
FT LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

2637 E. ATLANTIC BLVD
#266
POMPANO BEACH, FL 33062

New Mailing Address:

FEI Number: 65-0798171

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOCKLIN, WILLIAM A
3512 NW 10TH AVE
FT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

LACHAPELLE, SHERI A
2637 E ATLANTIC BLVD
#266
POMPANO BEACH, FL 33062 US

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: SHERI A LACHAPELLE

07/07/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LOCKLIN-LACHAPELLE, SHERI
Address: 190 NE 28 AVE, #609
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LACHAPELLE, SHERI
Address: 140 NE 28 AVE, #609
City-St-Zip: POMPANO BEACH, FL 33062

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: SHERI A LACHAPELLE

P

07/07/2006

Electronic Signature of Signing Officer or Director

Date