

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2008 08:00 AM
Secretary of State

DOCUMENT # P98000032560

1. Entity Name
DOUG PUTERBAUGH FRAMING INC.



Principal Place of Business
 8702 E. AQUARIUS DR.
 INVERNESS, FL 34450

Mailing Address
 8702 E. AQUARIUS DR.
 INVERNESS, FL 34450



01182008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3503959

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PUTERBAUGH, DOUG
 8702 E. AQUARIUS DR.
 INVERNESS, FL 34450

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 _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY:ST-ZIP
PD	PUTERBAUGH, DOUG	8702 E. AQUARIUS DR.	INVERNESS, FL 34450
TITLE	NAME	STREET ADDRESS	CITY:ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY:ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY:ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY:ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY:ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY:ST-ZIP

U00000806493
 02/06/08-80044-022 150.00

DO NOT WRITE IN THIS SPACE

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:

DOUG PUTERBAUGH

1-25-08

352 266-6940

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #