2007 FOR PROFIT-CORPORATION

ANNUAL REPORT FILED DOCUMENT # P98000059202 1. Entity Name 07 SEP 19 PM 2:56 MAINTENANCE MANAGEMENT, INC. ULURETARY OF STATE Principal Place of Business Mailing Address TALLAHASSEE, FLORIDA 3500 NW 97TH BLVD 3500 NW 97TH BLVD SUITE F SUITE F GAINESVILLE, FL 32606 GAINESVILLE, FL 32606 07292007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3519746 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE DANIEL, RHINE B 3500-F-NW 97TH BLVD GAINESVILLE, FL 32606 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the FILE NOW!!! FEE IS \$150.00 corporation did not receive the prior notice. Trust Fund Contribution. Added to Fees Due by September 14, 2007 OFFICERS AND DIRECTORS 10. PDC TITLE RHINE, DANIEL NAME STREET ADDRESS 5300-F NW 97TH BLVD GAINESVILLE, FL 32606 CITY-ST-ZIP TITLE NAME ANDREA, SMITH 3500-F NW 97TH BLVD STREET ADDRESS GAINESVILLE, FL 32606 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. Thereby certify that the information supplied with this filling 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 dustee 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

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OF

Daytime Phone #