

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000093065

FILED
Apr 10, 2006
Secretary of State

Entity Name: MAINTENANCE MANAGEMENT SOLUTIONS, INC.

Current Principal Place of Business:

4613 SHANNON CIRCLE
PENSACOLA, FL 32504

New Principal Place of Business:

Current Mailing Address:

PO BOX 30361
PENSACOLA, FL 32503

New Mailing Address:

FEI Number: 59-3543007

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHAFFER, JOHN E
4613 SHANNON CIRCLE
PENSACOLA, FL 32504 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: HULL, DAVID N
Address: PO BOX 695
City-St-Zip: MESSILLA PARK, NM 88047

Title: VTD () Delete
Name: ST. CHARLES, ROBIN
Address: 6045 ARNIES WAY
City-St-Zip: MILTON, FL 32570

Title: D () Delete
Name: SCHAFFER, JOHN E
Address: 4613 SHANNON CIRCLE
City-St-Zip: PENSACOLA, FL 32504

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VTD (X) Change () Addition
Name: ST. CHARLES, ROBIN
Address: P. O. BOX 361013
City-St-Zip: LOS ANGELES, CA 90036

Title: D (X) Change () Addition
Name: SCHAFFER, JOHN E
Address: P. O. BOX 30361
City-St-Zip: PENSACOLA, FL 32503

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: JOHN E SCHAFFER

D

04/10/2006

Electronic Signature of Signing Officer or Director

_____ Date