

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P9900008774

1. Entity Name
CARL'S MOBILE HOME SERVICE, INC.



Principal Place of Business
6331 FORRESTER DR
BRADENTON, FL 34202

Mailing Address
6331 FORRESTER DR
BRADENTON, FL 34202

DO NOT WRITE IN THIS SPACE

**FILED
May 01, 2006 08:00 AM
Secretary of State**

01172006 No Chg-F CR2E034 (11/05)

4. FEI Number 65-0894615	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LINZY, ELIZABETH G
6331 FORRESTER DR
BRADENTON, FL 34202

**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 restating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

4000000550004

05/13/06-80069-021 150.00

10.

OFFICERS AND DIRECTORS

TITLE: D
NAME: LINZY, PAUL
STREET ADDRESS: 6331 95TH ST E
CITY-ST-ZIP: BRADENTON, FL 34202

TITLE: D
NAME: LINZY, ELIZABETH
STREET ADDRESS: 6331 95TH ST E
CITY-ST-ZIP: BRADENTON, FL 34202

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

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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:  (PAUL LINZY)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(941) 752-9733
Daytime Phone #

Date