

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2006 08:00 AM
Secretary of State

DOCUMENT # P99000065229

1. Entity Name
SOUTHERN PINE BUILDERS OF VENICE, INC.



Principal Place of Business
5074 WINTER ROSE WAY
VENICE, FL 34293

Mailing Address
5074 WINTER ROSE WAY
VENICE, FL 34293

DO NOT WRITE IN THIS SPACE



01172006 No Chg-F CR2E034 (11/05)

4. FEI Number **65-0935750** Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

LEVIN, CHERI L
5074 WINTER ROSE WAY
VENICE, FL 34293

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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 Cheri L Levin Cheri L. Levin 2/20/06
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, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE **P**
 NAME **LEVIN, PAUL W**
 STREET ADDRESS **5074 WINTER ROSE WAY**
 CITY-ST-ZIP **VENICE, FL 34293**

TITLE **VPST**
 NAME **LEVIN, CHERIL**
 STREET ADDRESS **5074 WINTER ROSE WAY**
 CITY-ST-ZIP **VENICE, FL 34293**

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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: Cheri L. Levin, V.P. and CEO 2/20/06 941-492-4209
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #