2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2006 8:00 am
Secretary of State
02-21-2006 90028 045 ***158.75

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1. Entity Name
NATIONAL MAINTENANCE CORPORATION

Principal Place of Business	Mailing Address
14499 N DALE MABRY HWY TAMPA, FL 33618	14499 N DALE MABRY HWY TAMPA, FL 33618

2. Principal Place of Business	3. Mailing Address
5910 Benjamin Center Dr	5910 Benjamin Center Dr
Suite, Apt. #, etc. Suite 100	Suite, Apt. #, etc. Suite 100
City & State Tampa Florida	City & State Tampa Florida
Zip: 33634 Country: USA	Zip: 33634 Country: USA

02072006 Chg-P CR2E034 (11/05)

4. FEI Number: 59-3614764 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
RUSH, BRIAN P 3411 W. FLETCHER AVE., SUITE B TAMPA, FL 33618	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MILLER, DAN 14499 N. DALE MABRY, #201 TAMPA, FL 33618	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition	5910 Benjamin Center Dr., Ste 100 Tampa Fl 33634
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MILLER, MARY 14499 N. DALE MABRY, #201 TAMPA, FL 33618	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition	5910 Benjamin Center Dr., Ste 100 Tampa Fl 33634
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BAILEY, BARNEY 14499 N. DALE MABRY, #201 TAMPA, FL 33618	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition	5910 Benjamin Center Dr., Ste 100 Tampa Fl 33634
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CFOV PAYNE, VINCENT J 14499 N DALE MABRY HWY, STE 201 TAMPA, FL 33618	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition	5910 Benjamin Center Dr., Ste 100 Tampa Fl 33634
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition	

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: Vincent J Payne Vincent J Payne 813-962-2772
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #