

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S99951

Entity Name: HOOD'S MACHINE SHOP, INC.

FILED
Jan 18, 2006
Secretary of State

Current Principal Place of Business:

3841 PALM BEACH BLVD
FT MYERS, FL 33916

New Principal Place of Business:

3841 PALM BEACH BLVD
SUITE A
FT MYERS, FL 33916

Current Mailing Address:

3841 PALM BEACH BLVD
FT MYERS, FL 33916

New Mailing Address:

3841 PALM BEACH BLVD
SUITE A
FT MYERS, FL 33916

FEI Number: 65-0300410

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HOOD, JOE R
3841 PALM BEACH BLVD
FT MYERS, FL 33916 US

Name and Address of New Registered Agent:

HOOD, JOE R
3841 PALM BEACH BLVD
SUITE A
FT MYERS, FL 33916 US

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:

01/18/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: HOOD, JOE R
Address: 6700 OVERLOOK DR
City-St-Zip: FT MYERS, FL 33919 US

Title: VPS () Delete
Name: HOOD, CONNIE S
Address: 6705 OVERLOOK DR
City-St-Zip: FT MYERS, FL 33919 US

Title: D (X) Delete
Name: HOOD, KELLY J
Address: 480 NE 4TH AVE
City-St-Zip: CAPE CORAL, FL 33909 US

Title: D (X) Delete
Name: HOOD, DENNIS G
Address: 4241 SILVERSWORD CT
City-St-Zip: NORTH FT MYERS, FL 33903 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: HOOD, JOE R
Address: 6705 OVERLOOK DR
City-St-Zip: FT MYERS, FL 33919 US

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

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

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

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: JOE R. HOOD

P

01/18/2006

Electronic Signature of Signing Officer or Director

Date