


2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

FILED
Feb 26, 2007 08:00 AM
Secretary of State

DOCUMENT # F0600007561	
1. Entity Name PRIDE INDUSTRIES, INC.	

Principal Place of Business 10030 FOOTHILLS BLVD ROSEVILLE, CA 95747	Mailing Address PO BOX 370 AUBURN, CA 95604-0370
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DO NOT WRITE IN THIS SPACE

02092007 No Chg-NP CR2E037 (4/06)

4. FEI Number 94-1650529	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by May 1, 2007

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C RIGGS, JUDD 10030 FOOTHILLS BLVD ROSEVILLE, CA 95747
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC SYLVESTER, BOB 10030 FOOTHILLS BLVD ROSEVILLE, CA 95747
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PAYNE, WALT 10030 FOOTHILLS BLVD ROSEVILLE, CA 95747
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ZIEGLER, MICHAEL 10030 FOOTHILLS BLVD ROSEVILLE, CA 95747
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RICHMOND, JANET ESQ. 10030 FOOTHILLS BLVD ROSEVILLE, CA 95747
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T YAMAUCHI, TIMOTHY 10030 FOOTHILLS BLVD ROSEVILLE, CA 95747

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03/07/07-80049-020 61.25

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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 617, 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:  CFO Date: 02/15/07 Daytime Phone # _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR