


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # P00000082329

1. Entity Name
 1001 USES UTILITY BUILDING, INC.



Principal Place of Business Mailing Address

3738 N MONROE ST 3738 N MONROE ST
 TALLAHASSEE, FL 32303 TALLAHASSEE, FL 32303

DO NOT WRITE IN THIS SPACE



04192006 - No Chg-P CR2E034 (11/05)

4. FEI Number 59-3667932	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

STRICKLAND, BEVERLY A
 424 E CALL ST
 TALLAHASSEE, FL 32301

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 _____ 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

000000527214
 05/04/06-80106-006 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P RANDALL MATHIS, JOHNNIE SR 3738 N MONROE ST TALLAHASSEE, FL 32303
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V MATHIS, TONYA 3738 N MONROE ST TALLAHASSEE, FL 32303
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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:  04-19-06 850-562-0400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #