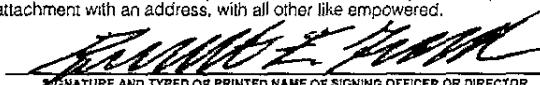


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 17, 2006 08:00 AM**  
**Secretary of State**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                        |                                                                                     |                                                        |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|-------------------------------------------------------------------------------------|--------------------------------------------------------|
| <b>DOCUMENT # H25487</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                        |    |                                                        |
| 1. Entity Name<br><b>R. E. FLOYD CONSTRUCTION CORPORATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                        |                                                                                     |                                                        |
| Principal Place of Business<br><b>208 SHORE DRIVE<br/>PALM HARBOR, FL 34683 US</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Mailing Address<br><b>208 SHORE DRIVE<br/>PALM HARBOR, FL 34683 US</b> |                                                                                     |                                                        |
| <b>DO NOT WRITE IN THIS SPACE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                        |  |                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                        | 04122006 No Chg-P CR2E034 (11/05)                                                   |                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                        | 4. FEI Number<br><b>59-2486816</b>                                                  | Applied For<br><input type="checkbox"/> Not Applicable |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                        | 5. Certificate of Status Desired <input type="checkbox"/>                           | <b>\$8.75</b> Additional Fee Required                  |
| 6. Name and Address of Current Registered Agent<br><br><b>FLOYD, ROBERT E.<br/>208 SHORE DRIVE<br/>PALM HARBOR, FL 34683</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                        | <b>DO NOT WRITE IN THIS SPACE</b>                                                   |                                                        |
| 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: _____<br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                        |                                                                                     |                                                        |
| <b>FILE NOW!!! FEE IS \$150.00<br/>After May 1, 2006 Fee will be \$550.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                        | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> | <b>\$5.00</b> May Be Added to Fees                     |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                        | <b>DO NOT WRITE IN THIS SPACE</b><br><br>U00000510770<br>04/29/06-80019-021 150.00  |                                                        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | P<br>FLOYD, ROBERT E.<br>208 SHORE DRIVE<br>PALM HARBOR, FL            |                                                                                     |                                                        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | ST<br>FLOYD, JUDITH L.<br>208 SHORE DRIVE<br>PALM HARBOR, FL           |                                                                                     |                                                        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | V<br>FLOYD, JUSTIN R<br>208 SHORE DRIVE<br>PALM HARBOR, FL             |                                                                                     |                                                        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                        |                                                                                     |                                                        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                        |                                                                                     |                                                        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                        |                                                                                     |                                                        |
| 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 807, 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:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                        | Date <b>4/12/06</b>                                                                 | Daytime Phone # <b>813 854-1683</b>                    |