2007 FOR PROFIT CORPORATION

FILED **ANNUAL REPORT** Feb 15, 2007 08:00 AN **DOCUMENT # J10887 Secretary of State** 1. Entity Name AVANZINI BUILDERS, INC. Principal Place of Business Mailing Address 3009 E GULF TO LAKE HWY 3009 E GULF TO LAKE INVERNESS, FL 34453 INVERNESS, FL 34453 01152007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2671713 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MOUNTJOY, S. MICHAEL DO NOT WRITE 209 COURTHOUSE SQUARE INVERNESS, FL 32650 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Recistered Agent signature required when reinstating) DATE \$5.00 May Bo 9. Election Campaign Financing U00000637651 02/26/07-80069-006 300.00 FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME AVANZINI, CHARLES WALTER 3009 E GULF TO LAKE HWY STREET ADDRESS CITY-ST-ZIP INVERNESS, FL 34453 TITLE AVANZINI, RICHARD PAUL NAME 3009 E GULF TO LAKE HWY STREET ADDRESS CITY-ST-ZIP INVERNESS, FL 34453 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment address, with all other like empowered.

SIGNATURE:

OF SIGNING OFFICER OR DIRECTOR

352-726-7465