2006 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 26, 2006 08:00 AN Secretary of State **DOCUMENT # 203839** TRANTER CONSTRUCTION COMPANY Mailing Address Principal Place of Business 12601 LACEY DRIVE 12601 LACEY DRIVE NEW PORT RICHEY, FL 34654 NEW PORT RICHEY, FL 34654 No Cha-P CR2E034 (11/05) 02242006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-0811277 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE TRANTER, STEVEN L 12601 LACEY DRIVE NEW PT RICHEY, FL 34654-1812 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and fille if applicable. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE YARBROUGH, ORIN S NAME 314 S MISSOURI AVE STREET ADDRESS CLEARWATER, FL 00000, CITY-ST-ZIP TITLE U00000536250 05/08/06-80087-005 150.00 TRANTER, STEVEN L NAME STREET ADDRESS **12601 LACEY DR** CITY-ST-ZIP NEW PT RICHEY, FL 00000, TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP DILE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 attach then taken address, with all other the empowered.

SIGNATURE: _

TOTLE NAME STREET ADDRESS CITY-ST-ZP

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED