2005 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Apr 25, 2005 08:00 AM Secretary of State **DOCUMENT # 673487** 1. Entity Name MCGOVERN CONSTRUCTION CORPORATION Principal Place of Business Mailing Address 8111 BROADWAY AVE E PO BOX 343 ESTERO, FL 33928 US SUITE A ESTERO, FL 33928 02012005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-2006645 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent MCGOVERN, BERNARD W. DO NOT WRITE 9316 LENNEX LANE FORT MYERS, FL 33919 IN THIS SPACE 6. 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. Lam familiar with, and accept the obligations of registered agent. Signature typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. מז TITLE MCGOVERN, BERNARD W. NAME STREET ADDRESS 8111 BROADWAY AVE E U00000328194 04/2\$/05-80069-805 158.75 CITY-ST-ZIP ESTERO, FL 33928 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZP IN THIS SPACE TITLE STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 for trustee ampowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 or Block 1 of the corporation or changed, or on an a

CITY-ST-ZIP TITLE NAME STREET ADDRESS CETY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP