2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#836163

ROCK HILL, SC

2245 RAVEN DRIVE

Address:

City-St-Zip:

DADDOOK CONCEDUCTION OF INC

FILED May 22, 2007 Secretary of State

| Entity Na | me: PADDO | JK CONSTRUCTION C | O., INC. | | | | |
|---|--|----------------------------|--------------------|--|-----------------|--|--|
| Current Principal Place of Business: | | | | New Principal Place of Business: | | | |
| P.O.BOX | OCK PARKW 11676 L, SC 29731 | 'AY | | | | | |
| Current Mailing Address: | | | | New Mailing Address: | | | |
| P.O.BOX | OCK PARKW .11676 .L, SC 29731 | 'AY | | | | | |
| FEI Number | : 57-0606967 | FEI Number Applied Fo | r() FEI Num | ber Not App | licable () | Certificate of Status Desired () | |
| Name and | l Address of | Current Registered Ag | jent: | Name and | Address o | of New Registered Agent: | |
| 1200 S. PI | ORATION SY NE ISLAND R ION, FL 3332 | OAD | | | | | |
| | named entity e of Florida. | submits this statement | for the purpose of | changing i | ts registere | d office or registered agent, or both, | |
| SIGNATUI | RE: | | | | | | |
| | Electro | nic Signature of Registe | ered Agent | | | Date | |
| Election Ca | mpaign Financir | ng Trust Fund Contribution | (). | | | | |
| OFFICERS AND DIRECTORS: | | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | | |
| Title: Name: Address: City-St-Zip: | T (PLUMB, THOM 3133 WIMBLE ROCK HILL, S | DON LN | | Title: Name: Address: City-St-Zip: | | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | SD (BAKER, MARI 50 FAIRWAY CLOVER, SC | * | | Title: Name: Address: City-St-Zip: | | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | PD (BAKER, DONA 8 PINE POINT LAKE WYLIE, | | | Title: Name: Address: City-St-Zip: | | () Change () Addition | |
| Title: Name: | V (GRAVES, C. E |) Delete | | Title: Name: | V HEISLER, R | (X) Change()Addition RONALD E JR. | |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

1102 PALMYRA DR.

TEGA CAY, SC 29708

SIGNATURE: THOMAS P. PLUMB 05/22/2007 Τ