2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#836270

FILED Apr 12, 2007 Secretary of State

Entity Name: F & W CONSTRUCTION COMPANY, INC. OF ALABAMA

Current P	rincipal Place	of Business:	New Principal Place	of Business:
947 COUN OZARK, A	NTY RD 18 L 36360 US	3		
Current N	lailing Addres	s:	New Mailing Addres	s:
P. O. BOX OZARK, A		8		
FEI Number	: 63-0702929	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)
Name and	l Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:
	BILL R. NOLIA AVENUE CITY, FL 3240			
	e named entity s e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,
n the State	e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,
n the State	e of Florida. RE:	submits this statement for the ic Signature of Registered Ag		d office or registered agent, or both, Date
n the State	e of Florida. RE: Electron			
in the State SIGNATUI	e of Florida. RE: Electron	ic Signature of Registered Ag	ent	
in the State SIGNATUI Election Car OFFICER: Title: Name: Address:	e of Florida. RE: Electron mpaign Financing S AND DIREC	ic Signature of Registered Ag Trust Fund Contribution (). TORS: Delete E II OAD 239	ent	Date
in the State	e of Florida. RE: Electron mpaign Financing S AND DIREC PRES () WELLS, NIGEL 311 COUNTY R OZARK, AL 363	ic Signature of Registered Ag Trust Fund Contribution (). TORS: Delete E II OAD 239 360 US Delete RGE M DRIVE	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: NIGEL E WELLS PRES 04/12/2007