2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2005
Secretary of State

DOCUMENT# 849280

Entity Name: MALONE CONSTRUCTION COMPANY, INC.

Current Principal Place of Business:

700 ANTONE ST, N.W.
P. O. BOX 19815 STATION N
ATLANTA, GA 30325

New Principal Place of Business:

Current Mailing Address:

700 ANTONE ST, N.W.
P. O. BOX 19815 STATION N
ATLANTA, GA 30325

New Mailing Address:

FEI Number: 58-0977528 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HEMENWAY, GEORGE R.
60 THIRD STREET
ROCKLEDGE, FL US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PT ( ) Delete
Name: MALONE, J. KIRK,
Address: 700 ANTONE STREET
City-St-Zip: ATLANTA, GA 30318

Title: V ( ) Delete
Name: HEMENWAY, GEORGE R,
Address: 60 THIRD ST
City-St-Zip: ROCKLEDGE, FL

Title: VS ( ) Delete
Name: BRIDGES, CLAUDE S.,
Address: 7085 RIVERSIDE DR. NW
City-St-Zip: ATLANTA, GA 30328

Title: VP ( ) Delete
Name: MCCLAIN, EDWIN R.,
Address: 4033 KENWAY PL, SE
City-St-Zip: SMYRNA, GA 30082

Title: VP ( ) Delete
Name: WILLIAMS, STEPHEN H.,
Address: 330 RIVERSIDE DR. NW
City-St-Zip: ATLANTA, GA 30328

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: EDWIN R. MCCLAIN VP 01/04/2005

Electronic Signature of Signing Officer or Director — Date