2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F01000001286

1. Entity Name

ROSS ENVIRONMENTAL & CIVIL CONTRACTORS COMPANY, INC.



FILED Jun 02, 2006 08:00 AM Secretary of State

Principal Place of Business

4232 CLIFF ROAD BIRMINGHAM, AL 35222 Mailing Address

POST OFFICE BOX 131436 BIRMINGHAM, AL 35213-1436



DO	NOT W	/RITE IN	THIS SF	ACE

02212006	No Chg-P	CR2E	E034 (11/05)	
4. FEI Number				oplied For
			. N	ot Applicable
5. Certificate of Status Desired			\$8.75 Add	

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

			IIN	I HIS SPACE			
	<u></u>						
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 Signature typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE							
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	cing \$5.00 May Be Added to Fees				
10.	OFFICERS AND DIREC	TORS					
TITLE	PC TORTORIGI, ROSS						
NAME STREET ADDRESS	4232 CLIFF ROAD			HUUUUULEEEsa			
CITY-ST-ZIP	BIRMINGHAM, AL 35222			06/02/06-80001-007 550.00			
TITLE	ST		[
NAME	DAVIS, PATRICIA		,				
STREET ADDRESS			· · · · · · · · · · · · · · · · · · ·				
CITY-ST-ZIP	BIRMINGHAM, AL 35222			·			
TITLE NAME		,	,				
STREET ADDRESS			0				
CITY-ST-ZIP			DO	NOT WRITE			
TITLE			IN IN	THIS SPACE			
NAME	නම් ද (මෙම්ර මෙට වු දම් දිදිය		ίίλ	I FIIS SPACE			
STREET ADDRESS CITY-ST-ZIP	Harry DA A Productor in Color to	tendes or the teld of the second	the state of the s				
TITLE	1						
NAME STREET ADDRESS (The second secon			
CITY-ST-ZIP			• · · · · · · · · · · · · · · · · · · ·				
THILE							
NAME CTREET LODGECC				and the second s			
STREET ADDRESS CITY-ST-ZIP			المناسع الهنيم والمناسع				
	partify that the information or nelled with this fill	-		5 14 6 14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			

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 of the residence of the residence of the corporation of the residence of the residence of the corporation of the residence of the reside

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-31-2006

205291-877/

Daytime Phone #