an 30 06 04:26p

Principal Place of Business

Ramona

2006 FOR PROFIT CORPORATION ANNUAL REPORT

Mailing Address

DOCUMENT # F04000004191

1. Entity Name

CITY-ST-ZIP

STREET ADDRESS

changed or on an attachment with

CITY-ST-ZIP

mle

NAME

FLOORE INDUSTRIAL CONTRACTORS, INC.



FILED

May 08, 2006 8:00 am Secretary of State

Change

Addition

05-08-2006 90305 021 ***150.00

40088256 4401-4 WILSON SPRINGS ROAD 4401-4 WILSON SPRINGS ROAD MOSS POINT, MS 39562 MOSS POINT, MS 39562 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01302006 Chg-P CR2E034 (11/05) City & State 4. FEI Number Applied For City & State 64-0840848 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name STREET, JOSEPH M Street Address (P.O. Box Number is Not Acceptable) 654 TIMBER RIDGE ROAD PENSACOLA, FL 32534 Ctv Zip Code 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 Florica. I am familiar with, and accept the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. De ete T.TLE Addition TiTLE FLOORE, PRENTISS G NVME NAME STREET ADDRESS 4401-4 WILSON SPRINGS ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MOSS POINT, MS 39562 Change VCVP ☐ Addition Delete TITLE TITLE FLOORE, MARK NAME NAME 4401-4 WILSON SPRINGS ROAD STREET ACCRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MOSS POINT, MS 39562 ☐ Chance ☐ Addition TITLE ☐ Delete TIFLE HANNING, GARY NAME NAME 4401-4 WILSON SPRINGS ROAD STREET ADDRESS STREET ACCIFESS CITY-ST-7 P MOSS POINT, MS 39562 CffY-ST-213 ☐ Change ☐ Addition De'ele TITLE TITLE SCARBROUGH, D.E. NAME NAME STREET ADDRESS 4401-4 WILSON SPRINGS ROAD STREET ADDRESS CITY-ST-ZIP MOSS POINT, MS 39562 CRY-ST-ZP ☐ Change Addition ☐ Delete TIT.E MAM: IJA ME STREET ADDRESS STREET ADDRESS

SIGNATURE:

Delete

ap address, with all other like empowered

CITY - ST-ZIP

STREET ADDRESS

CEY-S1-7 3

12. Thereby certify that the information supplied with this filling does not qualfy 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 efficier 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 in Block 10 or Block 11 if

TITLE

KAME