2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000006633

Entity Name: COLUSA CONTRACTING, INC.

FILED Jun 01, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1971 WEST LUMSDEN ROAD, SUITE 317 BRANDON, FL 33541

Current Mailing Address: New Mailing Address:

1971 WEST LUMSDEN ROAD, SUITE 317 BRANDON, FL 33541

FEI Number: 20-9185259 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

POYTHRESS, ALAN S

10111 MAJESTIC PALM CIRCLE #204
RIVERVIEW, FL 33569 US

COWIN, SUSAN E
9726 SKEWLEE ROAD
THONOTOSASSA, FL 33592 US

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: SUSAN E. COWIN 06/01/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C () Delete Title: () Change () Addition

 Name:
 LOGREIRA, XIMENA
 Name:

 Address:
 18459 PINES BLVD. #138
 Address:

 City-St-Zip:
 PEMBROKE PINES, FL 33029
 City-St-Zip:

Title: PVC () Delete Title: PVC (X) Change () Addition

 Name:
 COWIN, JAMES
 Name:
 COWIN, SUSAN

 Address:
 18459 PINES BLVD. #138
 Address:
 9726 SKEWLEE ROAD

 City-St-Zip:
 PEMBROKE PINES, FL 33029
 City-St-Zip:
 THONOTOSASSA, FL 33592

Title: DV (X) Delete Title: () Change () Addition

 Name:
 COWIN, SUSAN
 Name:

 Address:
 9378 MASON MONTGOMERY ROAD, SUITE 219
 Address:

 City-St-Zip:
 MASON, OH 45040
 City-St-Zip:

Title: DV (X) Delete Title: () Change () Addition

 Name:
 POYTHRESS, ALAN S
 Name:

 Address:
 10111 MAJESTIC PALM CIRCLE #204
 Address:

 City-St-Zip:
 RIVERVIEW, FL 33569
 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: SUSAN E. COWIN PVC 06/01/2005