## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jan 12, 2006 08:00 AN Secretary of State

<u></u>	ANNUAL R	EPORT		<del>-</del>		., 2006 ·	
DOCUMENT # F05000005843					Sec	retary o	of State
Entity Name     BANNER INDUSTRIAL CONSTRUCTION, INC.							
Principal Place 146 MCCALLA BESSEMER, A	A ROAD	Mailing Address P.O. BOX 747 BESSEMER, AL 35021-0747					
D	O NOT WRITE I	01042006 No Chg-P CR2E034 (11/05)  4. FEI Number					
	6. Name and Address of Current Regi	stered Agent		£	÷		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324					NOT W THIS SF		
the obligated	named entity submits this statement for the ons of registered agent.  Signature, typed or printed name of registered agent and title		ed office or registé d Agent signature require		oth, in the State of Flo	DATE	with, and accep
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00  9. Election Campaign Finar Trust Fund Contribution.			noing\$5	.00 May Be led to Fees	V00000 01/12/06-	)382664 -80023-004	 150.00
10.	OFFICERS AND DIRE	CTORS		· · · · · · · · · · · · · · · · · · ·	<del>'</del> -	,	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	CP SANFORD, ROBERT BILL JR. 146 MCCALLA ROAD BESSEMER, AL 35022 VV WASHBURN, MIKE 146 MCCALLA ROAD BESSEMER, AL 35022	· · · · · · · · · · · · · · · · · · ·				· · ·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	RITE	
title Name Street Address City-St-Zip				IN '	THIS SF	ACE	
TITLE NAME							

12. I hereby certily that the information supplied with this filing 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 Matury 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 tropice empewered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attackment with an address with all other like empowered.

SIGNATURE!

STREET ADDRESS CITY - ST-ZIP TITLE NAME STREET ADDRESS CITY - ST-ZIP

AND THED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

205481-1147