


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # F05000006272
 1. Entity Name
 TRILOGY GROUP CONTRACTORS, INC.



Principal Place of Business
 100 SUMMER BREEZE GLEN
 SUGAR HILL, GA 30518

Mailing Address
 100 SUMMER BREEZE GLEN
 SUGAR HILL, GA 30518

DO NOT WRITE IN THIS SPACE



01172006 No Chg-P CR2E034 (11/05)

4. FEI Number
 20-3066063 Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BERKHAN, CLAY
 5597 U.S. HWY. 98
 SUITE 200
 SANTA ROSA, FL 32459

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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 _____ (NOTE: Registered Agent signature required when reconstituting) DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CP BERKHAN, FELINA 100 SUMMER BREEZE GLEN SUGAR HILL, GA 30518
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCVP BERKHAN, CLAY 5597 U.S. HIGHWAY 98 WEST, STE. 250 SANTA ROSA, FL 32459
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 01/31/06-80010-005 150.00

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12. I hereby certify 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 that my 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 in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Clay Ber Khan 1-17-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #