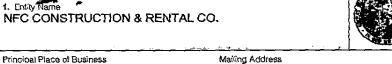
2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F66445 NFC CONSTRUCTION & RENTAL CO.

6. Name and Address of Current Registered Agent

FILED Jan 18, 2006 08:00 AM Secretary of State

Not Applicable



526 STOCKTON STREET

JACKSONVILLE, FL 32204



DO NOT WRITE IN THIS SPACE

01042006	No Chg-P	CR2E034 (11/05)
4. FEI Number		Applied For

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

HOLBROOK, H. LEON ONE INDEPENDENT DR. **SUITE 2301** JACKSONVILLE, FL 32202

SIGNATURE:

526 STOCKTON STREET JACKSONVILLE, FL 32204

DO NOT WRITE IN THIS SPACE

59-2155230

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	named entity submits this statement for the pions of registered agent.	urpose of changing its registered	office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept		
SIGNATURE	Signature, typical or printed name of registered agent and tile 4	applicable. (NOTE_Registered A	igent agnature	required when renstating)	DATE		
FILE NOWILI FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees							
16. OFFICERS AND DIRECTORS							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GAY, W W 524 STOCKTON STREET JACKSONVILLE, FL 32204				U00000390295		
TITLE KAME STREET ADDRESS CITY - ST ZIP	VS PAINTER, ROGER 526 STOCKTON STREET JACKSONVILLE, FL 32204		<u>۔</u>		01/23/06-80022-013 150.00		
TITLE KAME STREET ADDRESS CITY-ST ZIP	T LEE, KATHRYN S 524 STOCKTON STREET JACKSONVILLE, FL 32204	. Ann agric	DO NOT WRITE				
TITLE HAME STREET ADDRESS CITY-ST ZIP	D HOLBROOK, H. LEON ONE INDEPENDENT DR., SUITE 2301 JACKSONVILLE, FL 32202			IN .	THIS SPACE		
TITLE NAME STREET ADDRESS CITY ST ZIP							
TITLE NAME STREET ADDRESS CITY ST ZIP					,		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I turther 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 composition 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 changed, or on an attachment with an address, with all other (ike empowered).							