2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 10, 2005 08:00 AM Secretary of State **DOCUMENT # F96000003002** RIVES CONSTRUCTION COMPANY, INC. Principal Place of Business Mailing Address 5200 GRANTSWOOD RD 5200 GRANTSWOOD RD BIRMINGHAM, AL 35210 BIRMINGHAM, AL 35210 01032005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 63-0938018 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ROSTKOWSKI, LAWRENCE J DO NOT WRITE 98 PALMER AVE WINTER PARK, FL 32789 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 **\$5.00** May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE RIVES, VAUGHN P NAME STREET ADDRESS 5200 GRANTSWOOD RD CITY-ST-ZIP BIRMINGHAM, AL 35210 TITLE U00000175130 01/10/05-80039-006 [50.00 RIVES, MARK A MAME STREET ADDRESS 5200 GRANTSWOOD RD CITY-ST-ZIP BIRMINGHAM, AL 35210 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS. CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 of true the amount of the corporation or the receiver of true the amount of the corporation or the receiver of true the amount of the corporation or an attachment with an address, with all other like empowered.

Vaughn P. Rives

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

President

1/5/05

(205) 443-5000