2005 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT Jan 18, 2005 08:00 AM **Secretary of State** DOCUMENT # G31044 1. Entity Name ROYSTER CONSTRUCTION COMPANY, INC. Principal Place of Business Mailing Address 904 SKIPPER AVENUE 904 SKIPPER AVENUE FT. WALTON BCH., FL 32547-1806 FT. WALTON BCH., FL 32547-1806 No Chg-P CR2E034 (10/03) 01042005 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2292631 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ROYSTER, CLUADE C III DO NOT WRITE 808 EAST LAKE DRIVE SHALIMAR, FL 32579 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) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be П Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE ROYSTER, CLAUDE C III NAME STREET ADDRESS 808 EAST LAKE DR. CITY-ST-ZIP SHALIMAR, FL U000001817**5**0 TITLE 01/18/05-80010-009 150.oo ROYSTER, CLAUDE C III NAME STREET ADDRESS 808 EAST LAKE DRIVE CITY-ST-ZIP SHALIMAR, FL TITLE ROYSTER, CLAUDE C III NAME STREET ADDRESS 808 EAST LAKE DRIVE DO NOT WRITE CITY-ST-ZIP SHALIMAR, FL TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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 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 like empowered.

SIGNATURE:

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING

Claude C. Royster, TI

01-10-05

850.863.273/

Daytime Phone #

FILED