## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G71000

Address:

City-St-Zip:

20 SOUTH BROAD STREET

BROOKSVILLE, FL 34601 US

Entity Name: GRUBBS CONSTRUCTION COMPANY

FILED Feb 16, 2006 Secretary of State

| Current Principal Place of Business:          |  |                                | New Principal Place o                       | New Principal Place of Business:             |  |
|---|--|--------------------------------|---|--|--|
|   | HBROAD STRI<br>/ILLE, FL 3460                          |                                |   |  |  |
| Current Mailing Address:                      |  |                                | New Mailing Address                         | New Mailing Address:                         |  |
|   | I BROAD STRI<br>/ILLE, FL 3460                         |                                |   |  |  |
| FEI Number                                    | : 59-2340230   | FEI Number Applied For()       | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )            |  |
| Name and Address of Current Registered Agent: |  |                                | Name and Address of                         | Name and Address of New Registered Agent:    |  |
| 20 SOUTH                                      | AN LAW FIRM<br>I BROAD STRI<br>/ILLE, FL 3460          | ÉET                            |   |  |  |
|   | named entity s<br>e of Florida.                        | submits this statement for the | purpose of changing its registered          | office or registered agent, or both,         |  |
| SIGNATUI                                      | RE:  |                                |   |  |  |
|   | Electron   | ic Signature of Registered A   | gent  | Date   |  |
| Election Car                                  | mpaign Financing                                       | g Trust Fund Contribution ( ). |   |  |  |
| OFFICERS AND DIRECTORS:                       |  |                                | ADDITIONS/CHANGE                            | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | DPT ()<br>TAGLIA, RALPH<br>P.O. BOX 485<br>BROOKSVILLE |                                | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |
| Title:<br>Name:                               | DS ()<br>HOGAN, THOM                                   | Delete<br>AS S JR              | Title:<br>Name:                             | ( ) Change ( ) Addition                      |  |

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: R. VICTOR TAGLIA P 02/16/2006