## 2006 FOR PROFIT CORPORATION

## **ANNUAL REPORT** FILED Jan 23, 2006 08:00 AM **DOCUMENT # G88984 Secretary of State** 1. Entity Name DEW CONSTRUCTION CONSULTANTS, INC. Principal Place of Business Mailing Address 1932 DREW ST. P.O. BOX 5033 CLEARWATER, FL 33758-5033 STE. 5 CLEARWATER, FL 33765 CR2E034 (11/05) 01072006 No Cha-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-2403825 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WATT, DAVID E. DO NOT WRITE 1684 HAMILTON RD DUNEDIN, FL 34698 IN THIS SPACE 3. 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, 2006 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PD TITLE NAME WATT, DAVID E STREET ADDRESS P.O. BOX 5033 CITY-ST-ZIP CLEARWATER, FL 337585033 #M0##01395337 01/26/06-80046-022 150.00 TITLE CASSIN, MICHAEL J NAME STREET ADDRESS 3160 CLOVERPLACE DR CITY-ST-7IP PALM HARBOR, FL 34684 MiF NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ANDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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 if changed, or on an attachment/with an address

SIGNATURE:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP