2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2006
Secretary of State

DOCUMENT# H32747

Entity Name: JAMES BARR CONTRACTORS, INC.

Current Principal Place of Business:

C/O JAMES DAVID BARR, JR.
2145 MOUND AVENUE
PANAMA CITY, FL 32405

New Principal Place of Business:

Current Mailing Address:

C/O JAMES DAVID BARR, JR.
2145 MOUND AVENUE
PANAMA CITY, FL 32405

New Mailing Address:

FEI Number: 59-2479401 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BARR, MICHAEL LEE
2145 MOUND AVENUE
PANAMA CITY, FL 32405 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PST ( ) Delete
Name: BARR, MICHAEL LEE,
Address: 2145 MOUND AVENUE
City-St-Zip: PANAMA CITY, FL

Title: D ( ) Delete
Name: BARR, JIMMY D.,
Address: 321 BUNKERS COVE RD.
City-St-Zip: PANAMA CITY, FL

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: OFF (X) Change ( ) Addition
Name: BARR, MICHAEL LEE,
Address: 2145 MOUND AVENUE
City-St-Zip: PANAMA CITY, FL 32405

Title: D (X) Change ( ) Addition
Name: BARR, JIMMY D.,
Address: 310 BUNKERS COVE RD.
City-St-Zip: PANAMA CITY, FL 32401

Title: OFF ( ) Change (X) Addition
Name: BROERSMA, MARK W.,
Address: 2145 MOUND AVENUE
City-St-Zip: PANAMA CITY, FL 32405

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: MICHAEL LEE BARR OFF 04/11/2006
Electronic Signature of Signing Officer or Director Date