2005 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 18, 2005 08:00 AM Secretary of State DOCUMENT # J13693 1. Entity Name DANIEL J. RICHARD CONSTRUCTION, INC. Principal Place of Business Mailing Address 13215 SPRING HILL DRIVE 13215 SPRING HILL DRIVE SPRING HILL, FL 34609 SPRING HILL, FL 34609 CR2E034 (10/03) 01112005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2678988 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RICHARD, DANIEL J. DO NOT WRITE 7882 PINEHURST DR. SPRING HILL, FL 34606 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, typed or printed name of registered agent and title il applicable (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PST TITLE 1300000181740 01/18/05-80009-024 150,00 NAME RICHARD, DANIEL J. STREET ADDRESS 2390 RING RD. CITY-ST-ZIP SPRING HILL, FL 34609 TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP 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 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.

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TITLE
NAME
STREET ADDRESS
GITY-ST-ZIP

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

/12/05 352-686-2222

FILED