2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # J23585 1. Entity Name MICHAEL WILLIS RESIDENTIAL CONTRACTOR, INC. Principal Place of Business Mailing Address C/O MICHAEL WILLIS C/O MICHAEL WILLIS 3710 N.WILDER RD. PLANT CITY, FL 33565-8683 3710 N.WILDER RD. PLANT CITY, FL 33565-8683

FILED Apr 13, 2005 08:00 AM Secretary of State

WLLIS, M 3710 N.W	Name and Address of Curren ICHAEL	E IN THIS SPACE	CE	O3312005 No Chg-P CR2E034 (10/03) 4. FEI Number S9-2757470 Applied For Not Applicable 5. Certificate of Status Desired S8.75 Additional Fee Required DO NOT WRITE 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. It am familiar with, and accept the obligations of registered agent. SIGNATURE Signature. Noted or content name of registered agent and this if applicable (NOTE, Registered Agent signature required when remaining) FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 It ust Fund Contribution				
10.	OFFICERS AND	DÓIRECTORS	1	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	WILLIS, MICHAEL 3710 N.WILDER RD. PLANT CITY, FL	· · · · · · · · · · · · · · · · · · ·		(100000301283 04/13/05-80024-015 150.00
TITLE NAME STREET ADDRESS ORY-ST-ZIP			-	DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE
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12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 1.19.07(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				