

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

**FILED
Jan 06, 2006 8:00 am
Secretary of State**

01-06-2006 90001 006 ***150.00

DOCUMENT # J66527		
1. Entity Name R.L. STEWARD CONSTRUCTION, INC.		

Principal Place of Business MORRISTON, FL MORRISTON, FL 32668		Mailing Address 17690 SE 63RD LANE MORRISTON, FL 32668			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent STEWARD, RICHARD L. 1104 OAKVIEW AVE CLEARWATER, FL 33016 <i>17690 SE 63rd Lane Morriston, FL 32668</i>				7. Name and Address of New Registered Agent	

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: *Sharon Steward* Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when revising) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
PT STEWARD, RICHARD L. 1104 OAKVIEW AVE CLEARWATER, FL	<input type="checkbox"/> Delete	PT Steward, Richard L 17690 SE 63rd Lane morriston, FL 32668	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
S STEWARD, SHARON 1104 OAKVIEW AVE CLEARWATER, FL 33756	<input type="checkbox"/> Delete	S Steward, Sharon 17690 SE 63rd Lane morriston, FL 32668	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing 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, with an other like empowered.

SIGNATURE: *Sharon Steward* **1-4-2006 332-5284383**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Sec. 002 Daytime Phone #