
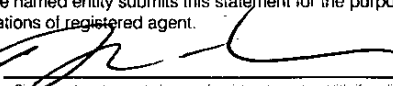
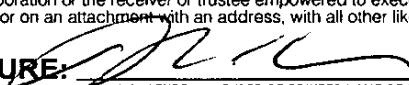


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2006 8:00 am
Secretary of State

02-16-2006 90038 043 ***150.00

| | | | | | |
|--|---|--|---|---|--|
| DOCUMENT # J80868 1. Entity Name ALPHA CONSTRUCTION AND DEVELOPMENT, INC. | | | |  | |
| Principal Place of Business % NICK V. ELLIS 3232 N. TAMiami TRAIL, BLDG B SARASOTA, FL 34234 | | | Mailing Address % NICK V. ELLIS 3232 N. TAMiami TRAIL, BLDG B SARASOTA, FL 34234 | | |
| 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 | | | | 7. Name and Address of New Registered Agent | |
| ELLIS, NICK V 3232 N. TAMiami TRAIL, BLDG B SARASOTA, FL 34234 | | | | Name Ellis, Nick V. Jr. Street Address (P.O. Box Number is Not Acceptable) 3232 N. Tamiami Trail, Bldg. B City Sarasota FL Zip Code 34234 | |
| 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  Nick V. Ellis, Jr. <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small> | | | | | |
| 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 | | |
| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P ELLIS, NICK V. 3232 NORTH TAMiami TRAIL BLDG B SARASOTA, FL 34234 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | P Ellis, Nick V. Jr. 3232 N. Tamiami Trail, Bldg. B Sarasota, FL 34234 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V ELLIS, MILDRED P 3232 NORTH TAMiami TRAIL BLDG B SARASOTA, FL 34234 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | V Ellis, Richard V. 3232 N. Tamiami Trail, Bldg. B. Sarasota, FL 34234 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | ST ELLIS, NICK V JR 3232 NORTH TAMiami TRAIL BLDG B SARASOTA, FL 34234 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | ST Ellis, Mildred P. 3232 N. Tamiami Trail, Bldg. B. Sarasota, FL 34234 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| 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 all other like empowered. | | | | | |
| SIGNATURE:  | | | Nick V. Ellis, Jr. <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | | |
| | | | Date _____ Daytime Phone # 941-355-7175 | | |