## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J82383

FILED Jan 30, 2006 Secretary of State

Entity Name: FLORIDA COMMERCIAL CONTRACTORS CORPORATION

**New Principal Place of Business: Current Principal Place of Business:** 179 SHORE DRIVE PALM HARBOR, FL 34683 **Current Mailing Address: New Mailing Address:** P. O. BOX 1621 PALM HARBOR, FL 346821621 FEI Number: 59-2825697 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BUTLER, MARIA L 179 SHORE DRIVE PALM HARBOR, FL 34683 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition BUTLER, ROBERT P BUTLER, ROBERT P Name: Name: 179 SHORE DRIVE 179 SHORE DRIVE Address: Address: City-St-Zip: PALM HARBOR, FL City-St-Zip: PALM HARBOR, FL 34683 Title: PSD Title: PSD (X) Change ( ) Addition () Delete Name: BUTLER, MARIA L Name: BUTLER, MARIA L

179 SHORE DRIVE Address: 179 SHORE DRIVE Address: PALM HARBOR, FL PALM HARBOR, FL 34683 City-St-Zip: City-St-Zip:

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.

Ρ SIGNATURE: MARIA L. BUTLER 01/30/2006