2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K17016

FILED Apr 26, 2006 Secretary of State

Entity Name: MCNAB CONSTRUCTION & DEVELOPMENT, INC.

Current Principal Place of Business: New Principal Place of Business: 6 MADIERA CT 31 SAN GABRIEL LANE PALM COAST, FL 32137 PALM COAST, FL 32137 **Current Mailing Address: New Mailing Address: BOX 1230** PO BOX 1230 US FLAGLER BEACH, FL 32136 US FLAGLER BEACH, FL 32136 FEI Number: 59-2887894 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: MCNAB, JAMES M. MCNAB, JAMES M. 6 MADIERA CT 31 SAN GABRIEL LANE PALM COAST, FL 3137 US US PALM COAST, FL 32137 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: 04/26/2006 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 MCNAB, JAMES M MCNAB, JAMES M Name: Name: PO BOX 1614 PO BOX 1230 Address: Address: City-St-Zip: FLAGLER BEACH, FL 32136 City-St-Zip: FLAGLER BEACH, FL 32136 Title: Title: () Delete (X) Change () Addition MCNAB, MARGARET S Name: MCNAB, MARGARET S Name: BOX 1230 1328 SO A1A PO BOX 1230 Address: Address: FLAGLER BEACH, FL City-St-Zip: City-St-Zip: FLAGLER BEACH, FL Title: Title: () Delete () Change () Addition MCNAB, JAMES M JR Name: Name: 5185 SOUTH TROPICAL TRAIL Address: Address: City-St-Zip: MERRITT ISLAND, FL 32952 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.

SIGNATURE: JAMES M. MCNAB P 04/26/2006