2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2006
Secretary of State

DOCUMENT# K36673

Entity Name: WELLS BROTHERS CONSTRUCTION CO. INC.

Current Principal Place of Business:

9440 SW 48TH AVE.
PALM CITY, FL 34990 US

New Principal Place of Business:

Current Mailing Address:

9440 SW 48TH AVE.
PALM CITY, FL 34990 US

New Mailing Address:

FEI Number: 65-0075750 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WELLS, SCOTT
4841 SW ZARRELLA STREET
PALM CITY, FL 34990 US

Name and Address of New Registered Agent:

WELLS, SCOTT
9440 SW 48TH AVE
PALM CITY, FL 34990 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: 02/16/2006
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: WELLS, SCOTT,
Address: 4841 SW ZARRELLA STREET
City-St-Zip: PALM CITY, FL 34990

Title: V ( ) Delete
Name: WELLS, DAVID,
Address: 9440 SW 48TH AVE.
City-St-Zip: PALM CITY, FL 34990

Title: T ( ) Delete
Name: WELLS, MIKE,
Address: 3971 HWY. 441 SE
City-St-Zip: OKEECHOBEE, FL 34974

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: WELLS, SCOTT,
Address: 9440 SW 48TH AVE
City-St-Zip: PALM CITY, FL 34990

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change ( ) Addition
Name: WELLS, MIKE,
Address: 4509 SE HWY 441
City-St-Zip: OKEECHOBEE, FL 34974

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: DAVID WELLS V 02/16/2006
Electronic Signature of Signing Officer or Director — Date