2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K56792

FILED Apr 13, 2006 Secretary of State

Entity Name: BLACKSHEAR AND SONS CONTRACT METALS, INC.

We peggy blackshear kennedy 43174 Pineridge dr Callahan, Fl. 32011 Us Current Mailing Address: New Mailing Address: Peggy blackshear kennedy 43174 Pineridge dr Callahan, Fl. 32011 Us Fel Number: 59-2929025 Fel Number Applied For () Fel Number Not Applicable of the Name and Address of Current Registered Agent: Name and Address of Current Registered Agent: Name and Address dr Name A) Certificate of Status Desired() ess of New Registered Agent:
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% PEGGY BLACKSHEAR KENNEDY 43174 PINERIDGE DR CALLAHAN, FL 32011 US FEI Number: 59-2929025 FEI Number Applied For () FEI Number Not Applicable (Name and Address of Current Registered Agent: Name and Address DUCLAY RD BOLE, JOHNNA M. 6108 DUCLAY RD JACKSONVILLE, FL 32244 US The above named entity submits this statement for the purpose of changing its regin the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: ADDITIONS/CHARME: KENNEDY, PEGGY BLACK, SHEAR Name:) Certificate of Status Desired () ess of New Registered Agent: stered office or registered agent, or both
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Name: KENNEDY, PEGGY BLACK, SHEAR Name:	() Change () Addition
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Address: 240 HUNTERS RD Address:	
city-St-Zip: RED BAY, AL 35582 City-St-Zip:	
itle: D () Delete Title:	() Change () Addition
lame: BLACKSHEAR, J. DAWSO, N Name:	
ddress: 43154 WOODLAND LN Address:	
City-St-Zip: CALLAHAN, FL 32011 City-St-Zip:	
Title: D () Delete Title:	() Change () Addition
lame: BLACKSHEAR, EDWARD N, . Name:	()
Address: 1598 WATERS EDGE DR Address:	
city-St-Zip: ORANGE PK, FL 32003 City-St-Zip:	
Title: D () Delete Title:	() Change () Addition
lame: BLACKSHEAR, LEE B., Name:	() = () / / / / / / / / / / / / / / / / / /
Address: 44850 WOODLAND CIRCLE Address:	
City-St-Zip: CALLAHAN, FL 32011 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: JOHNNA M. BOLE BOOK 04/13/2006