2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000022689

Entity Name: ST. JOE CENTRAL FLORIDA CONTRACTING, INC.

FILED Apr 21, 2005 Secretary of State

Current Principal Place of Business:			New Pr	New Principal Place of Business:	
245 RIVERSIDE AVENUE, SUITE 500 JACKSONVILLE, FL 32202					
Current Mailing Address:			New Ma	ailing Address:	
245 RIVERSIDE AVENUE, SUITE 500 ATTN: LEGAL DEPT. JACKSONVILLE, FL 32202					
FEI Number: 59-3629651 FEI Number Applied For ()		FEI Number Not A	Applicable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
MARX, CHRISTINE M 245 RIVERSIDE AVENUE, SUITE 500 JACKSONVILLE, FL 32202 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			t	Date	
Election Cam	paign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITI	IONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	GREENE, WILL	AVENUE SUITE 500	Title: Name: Address: City-St-Zi		
Title: Name: Address: City-St-Zip:	REGAN, MICHA	AVENUE, SUITE 500	Title: Name: Address: City-St-Zi	· · · · · · · · · · · · · · · · · · ·	
Title: Name: Address: City-St-Zip:	MARX, CHRISTI	AVENUE, SUITE 500	Title: Name: Address: City-St-Zi	•	
Title: Name: Address: City-St-Zip:	WHITLATCH, SU	AVENUE, SUITE 500	Title: Name: Address: City-St-Zi		
Title: Name: Address: City-St-Zip:	CHILDERS, DAY	AVENUE SUITE 500	Title: Name: Address: City-St-Zi		
Title: Name: Address:	SOLOMON, STE	Delete EPHEN W : AVENUE SUITE 500	Title: Name: Address:	V (X) Change () Addition HILL, M. EDWARD 211 SPALDING WAY	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

City-St-Zip:

DELAND, FL

SIGNATURE: SUSAN G. WHITLATCH AS 04/21/2005

JACKSONVILLE, FL 32202

City-St-Zip: