

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000011706

FILED
Jan 16, 2006
Secretary of State

Entity Name: DAVID JOSEPH BURNS GENERAL CONTRACTING, INC.

Current Principal Place of Business:

2946 HAWTHORN CT
NAPLES, FL 34104

New Principal Place of Business:

2946 HAWTHORN CT
NAPLES, FL 34104 US

Current Mailing Address:

2946 HAWTHORN CT
NAPLES, FL 34104

New Mailing Address:

2946 HAWTHORN CT
NAPLES, FL 34104 US

FEI Number: 59-3693730

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURNS, DAVID J PD
2946 HAWTHORNE CT
NAPLES, FL 34104 US

Name and Address of New Registered Agent:

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:

Title: V () Delete
Name: BURNS, ELLEN S
Address: 2946 HAWTHORNE CT
City-St-Zip: NAPLES, FL 34104

Title: V () Delete
Name: BURNS, LUKE J
Address: 2946 HAWTHORNE CT
City-St-Zip: NAPLES, FL 34104

Title: V () Delete
Name: BURNS, JESSE R
Address: 2946 HAWTHORNE CT
City-St-Zip: NAPLES, FL 34104

Title: PD () Delete
Name: BURNS, DAVID J PD
Address: 2946 HAWTHORNE CT
City-St-Zip: NAPLES, FL 34104

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: () Change () Addition
Name:
Address:
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: DAVID J. BURNS

PD

01/16/2006

Electronic Signature of Signing Officer or Director

Date