


**2005-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 07, 2005 8:00 am
Secretary of State

03-07-2005 90258 048 ***150.00

DOCUMENT # P01000095258	
1. Entity Name G.W. CONSTRUCTION OF BREVARD, INC.	

Principal Place of Business 4105 LAKE GLENN DR MELBOURNE, FL 32934	Mailing Address 4105 LAKE GLENN DR MELBOURNE, FL 32934
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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02242005 Chg-P CR2E034 (10/03)

4. FEI Number 59-3271167	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent
WALSH, GREG 4105 LAKE GLENN DR MELBOURNE, FL 32934

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	DATE
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FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE	D <input type="checkbox"/> Delete
NAME	WALSH, GREG
STREET ADDRESS	4105 LAKE GLENN DR
CITY - ST - ZIP	MELBOURNE, FL 32934
TITLE	VP <input type="checkbox"/> Delete
NAME	STEWART, DARYL D
STREET ADDRESS	4105 LAKE GLENN DR
CITY - ST - ZIP	MELBOURNE, FL 32934
TITLE	DS <input checked="" type="checkbox"/> Delete
NAME	PARKHURST, JAMES
STREET ADDRESS	2275 SMATHERS CIR
CITY - ST - ZIP	MELBOURNE, FL 32935
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	Secretary <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Dolores Walsh
STREET ADDRESS	4105 Lake Glenn Dr
CITY - ST - ZIP	Melbourne FL 32934
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Gregory J. Walsh
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/25/05 321-403-8126
Date Daytime Phone #