2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000080044

Entity Name: HUCO CONSTRUCTION SERVICES, INC.

FILED Jan 12, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1276 WEST ADAMS STREET 3893 CEDAR COVE LANE JACKSONVILLE, FL 33204 JACKSONVILLE, FL 32257

Current Mailing Address: New Mailing Address:

PO BOX 3316 11250 OLD ST. AUGUSTINE ROAD JACKSONVILLE, FL 32206 #320

JACKSONVILLE, FL 32257

FEI Number: 90-0044734 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NORMAN, HUBERT JOSEPHT JR.

1276 WEST ADAMS STREET

JACKSONVILLE, FL 33204 US

NORMAN, KRISTINE

3893 CEDAR COVE LANE

JACKSONVILLE, FL 32257 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: KRISTINE NORMAN 01/12/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete

Name: NORMAN, HUBERT JOSEPH JR Address: 3893 CEDAR COVE LANE City-St-Zip: JACKSONVILLE, FL 32257

 Title:
 VP () Delete

 Name:
 SCOTT, MARK MICHAEL JR.

 Address:
 12659 BEAUBIEN ROAD

 City-St-Zip:
 JACKSONVILLE, FL 32258

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NORMAN, KRISTINE
Address: 3893 CEDAR COVE LANE

City-St-Zip: JACKSONVILLE, FL 32257

Title: VP (X) Change () Addition

Name: NORMAN, HUBERT J JR.
Address: 3893 CEDAR COVE LANE
City-St-Zip: JACKSONVILLE, FL 32257

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.

SIGNATURE: KRISTINE NORMAN P 01/12/2005