2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 11, 2007 08:00 AM **DOCUMENT # P02000113565 Secretary of State** 1. Entity Name DILLMAN CONSTRUCTION COMPANY, INC. Mailing Address Principal Place of Business 1530 CLERMONT DRIVE 1530 CLERMONT DRIVE UNIT G303 UNIT G303 NAPLES, FL 34109 NAPLES, FL 34109 CR2E034 (11/05) 01092007 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 04-3718204 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. DO NOT WRITE 1840 SW 22ND ST. 4TH FLOOR IN THIS SPACE MIAMI, FL 33145 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. DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. **PSTD** MLE DILLMAN, KEN NAME STREET ADDRESS 1530 CLEARMONT DRIVE, UNIT G303 CITY-ST-ZIP NAPLES, FL 34109 THE NAME STREET ADDRESS CITY-ST-ZIP U00000583704 U1/12/07-80006-019 158.75 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TREE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental reporties 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 paceiver 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 attack

SIGNATURE:

CITY-ST-ZIP TIME NAME STREET ADDRESS CITY-ST-ZIP

07