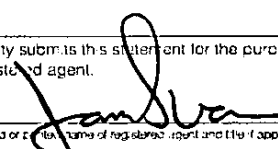
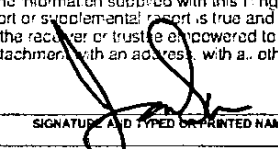


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2006 8:00 am
Secretary of State

01-19-2006 90076 015 ***150.00

DOCUMENT # P02000131801 1. Entity Name SVENSON CONSTRUCTION, INC.					
Principal Place of Business 1715 HERMIT SMITH ROAD APOPKA, FL 32712			Mailing Address 1715 HERMIT SMITH ROAD APOPKA, FL 32712		
2. Principal Place of Business 1715 Hermit Smith Rd		3. Mailing Address 1715 Hermit Smith Rd			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State Apopka, FL		City & State Apopka FL		4. FEI Number 65-1168282	
Zip 32712		Country ORANGE		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
Zip 32712		Country ORANGE		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SVENSON, JAMES 1715 HERMIT SMITH ROAD APOPKA, FL 32712			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:  DATE: 1/12/06 Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when consolidating)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SVENSON, JAMES 1715 HERMIT SMITH ROAD APOPKA, FL 32712	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SVENSON, CONNIE 1715 HERMIT SMITH ROAD APOPKA, FL 32712	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD STEVENSON, WALTER 3960 CRAY RICH CIRCLE ORLANDO, FL 328390000	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition TO SVENSON, WALTER 3960 CRAY RICH CIRCLE ORLANDO FL. 32839	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 567, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with a, other like empowered.					
SIGNATURE:  JAMES SVENSON (PRES) DATE: 1/12/06 PHONE: 321-291-5453 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					