2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006
Secretary of State

DOCUMENT# P02473

Entity Name: CAJUN CONSTRUCTORS, INC.

Current Principal Place of Business:

15635 AIRLINE HIGHWAY
BATON ROUGE, LA 70817

New Principal Place of Business:

Current Mailing Address:

PO BOX 104
BATON ROUGE, LA 708210104 US

New Mailing Address:

FEI Number: 72-0733546 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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: C ( ) Delete
Name: GRIGSBBY, L. LANE
Address: 19145 W MUIRFIELD CIRCLE
City-St-Zip: BATON ROUGE, LA 70810

Title: P ( ) Delete
Name: JACOB, JOHN K
Address: 3381 E LAKESHORE DR
City-St-Zip: BATON ROUGE, LA 70808

Title: EVPC ( ) Delete
Name: GRAVNARD, MILTON G
Address: 12459 GOODWOOD BLVD.
City-St-Zip: BATON ROUGE, LA 70815

Title: D ( ) Delete
Name: SEXTON, R. GARY
Address: 6513 PERKINS RD.
City-St-Zip: BATON ROUGE, LA 70898

Title: ST ( ) Delete
Name: RECILE, SHANE
Address: 6002 JONATHAN ALECIA AVE
City-St-Zip: GONZALES, LA 70737

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:

Title: ST (X) Change ( ) Addition
Name: RECILE, SHANE
Address: 6002 JONATHAN ALARIC AVE
City-St-Zip: GONZALES, LA 70737

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: SHANE RECILE CFO 04/24/2006

Electronic Signature of Signing Officer or Director — Date