


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000044275 1. Entity Name MCKINZIE CONSTRUCTION MANAGEMENT, INC.	
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Principal Place of Business 390 NW 29TH AVE. FT. LAUDERDALE, FL 33311	Mailing Address 390 NW 29TH AVE. FT. LAUDERDALE, FL 33311
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DO NOT WRITE IN THIS SPACE



04232006 No Chg-P CR2E034 (11/05)

4. FEI Number 56-2353537	Applied For 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 MCKINZIE, DWIGHT 390 NW 29TH AVE FORT LAUDERDALE, FL 33311

**DO NOT WRITE
IN THIS SPACE**

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 <i>Dwight McKinzie</i> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent signature required when reinstating)	DATE <i>April 24, 2006</i>

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 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 NAME STREET ADDRESS CITY-ST-ZIP	PSTD MCKINZIE, DWIGHT 390 NW 29TH AVE. FT. LAUDERDALE, FL 33311
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05/15/06-80098-016 150.00

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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 687, 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: <i>Dwight McKinzie</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	DATE: <i>April 24, 2006</i> Daytime Phone: <i>954-822-1100</i>
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