2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000049563

Entity Name: PEREZ FAMILY CONSTRUCTION COMPANY

FILED Jan 03, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 6970 SW 108TH AVE CEDAR KEY, FL 32625 **Current Mailing Address: New Mailing Address:** P O BOX 874 CEDAR KEY, FL 32625 FEI Number: 38-3681058 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: DELAINO, WILLIAM E 1191 8TH ST CEDAR KEY, FL 32625 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CHRM () Delete Title: () Change () Addition DELAINO, WILLIAM E JR. Name: Name: 1191 8TH STREET Address: Address: City-St-Zip: CEDAR KEY, FL 32625 City-St-Zip: Title: Title: () Delete () Change () Addition Name: PEREZ. TEOFILO N Name: 6950 SW 108TH AVE Address: Address: City-St-Zip: CEDAR KEY, FL 32625 City-St-Zip: Title: Title: () Delete () Change () Addition PEREZ, ROBERT Name: Name: 6950 SW 108TH AVE Address: Address: CEDAR KEY, FL 32625 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition CAUSEY, KATHY Name: Name: Address: 12421 SR 124 Address: City-St-Zip: CEDAR KEY, FL 32625 City-St-Zip: Title: Title: (X) Change () Addition () Delete Name: FEIGIN, DAVID A Name: STARLING, GARY W

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.

Address:

City-St-Zip:

442 SW 3ND STREET

OTTER CREEK, FL 32683

SIGNATURE: WILLIAM E. DELAINO, JR. CHRM 01/03/2006

324 PLYMOUTH STREET

SAFETY HARBOR, FL 32695

Address:

City-St-Zip: