2006 FOR PROFIT CORPORATION

Apr 07, 2006 8:00 am Secretary of State **ANNUAL REPORT** 04-07-2006 90031 048 ***150.00 DOCUMENT # P03000115691 1. Entity Name LORD BUILT CONSTRUCTION, INC. Principal Place of Business Mailing Address 203 N MAIN ST PO BOX 281 AUBURNDALE, FL 33823 AUBURNDALE, FL 33823 2. Principal Place of Business Mailing Address ers Ave <u>333 W. Bridaers</u> Ave 03222006 CR2E034 (11/05) rpurnda 4. FÉI Number Applied For U5A 59-2413909 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent]erry LORD, JERRY Box Number is Not Acceptable) 203 N MAIN ST AUBURNDALE, FL 33823 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, the obligations of registered agent SIGNATURE tered agent and title if applicable (NOTE, Registere 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. DPS TITLE ☐ Delete TITLE ☐ Change ☐ Addition LORD, JERRY NAME 333 W. Bridgers Ave NAME STREET ADDRESS 203 N MAIN ST STREET ADDRESS CITY-ST-ZIP AUBURNDALE, FL 33823 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IF TITLE Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP

FILED

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 607. 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: