2006 FOR PROFIT CORPORATION ANNUAL REPORT

Jul 18, 2006 8:00 am Secretary of State DOCUMENT # P03000123145 07-18-2006 90084 045 ***150.00 JOHN ADAMS CONSTRUCTION COMPANY Principal Place of Business Mailing Address 5106 INDIAN BLUFF DR. 2335 E. BALDWIN RD. YOUNGSTOWN, FL 32466 PANAMA CITY, FL 32401-5801 3. Mailing Address 2. Principal Place of Business 5106 INDIAN BUFF DA Suite, Apt. #, etc. Suite, , #, et: 07062006 CR2E034 (11/05) 4. FEI Number Applied For City & State OUNGSTOWN, FL 20-0325601 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ROBINSON, MICHAEL Street Address (P.O. Box Number is Not Acceptable) 2335 E. BALDWIN ROAD PANAMA CITY, FL 32405-5801 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 6, 2006 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. PV Change Addition TITLE □ Delete TITLE NAME ADAMS, JOHN E 5106 INDIAN BLUFF DR. STREET ADDRESS STREET ADDRESS 5301 SOULE DRIVE CITY+ST-ZIP YOUNGSTOWN FE 32466 PANAMA CITY, FL 324047236 CITY-ST-ZE **Change** Addition ST ☐ Delete TITLE TITLE ADAMS, JOHN E NAME SIOL INDIAN BLUFF DR. STREET ADDRESS STREET ADDRESS 5301 SOULE DRIVE YOUNGSTOWN, FL 32466 PANAMA CITY, FL 324047236 CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-\$T-ZIP ☐ Change ☐ Addition Delete TITLE TITLE 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 Chance ☐ Addition TITLE □ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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.

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED

2006 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT						ATTACHMENT				
DOCUMENT # P03000123145 1. Entity Name JOHN ADAMS CONSTRUCTION COMPANY							rrvilaes ∀			
Principal Place of Business Malting Address					1					
5106 INDIAN BLUFF DR. Youngstown, Fl. 32466		2335 E. BALDWIN RD. PANAMA CITY, FL 32401-5801		40099656						
2. Principal Place of Business		3. Melling Address		Time						
Suite, Apt. #, etc.		Sulte. Apt. 4, etc.			06172006	Chg-P	CR2E03	4 (11/05)		
City & State		City & State			4. FEI Numbe 20-032				pplied For of Applicable	
Zip	Country	Zip	Count	ry		of Status Desired	LJ 6,	8.75 Ada no Require		
6. Name and Address of Current Rag		t Registered Agent	Itered Agent		7. Name and	Address of New	Registered Ag	ent		
ROBINSO	N, MICHAEL .		į	Name						
2335 E. BALDWIN ROAD PANAMA CITY, FL 32405-5801				Street Address (P.O. Box Number is Not Acceptable)						
					FL Zip			Zip Cod	lo l	
 The above named entry submits this statement for the purpose of changing its registered office or registered agont, or both. In the State of Florida. I am familiar with, and accept the obligations of registered agont. SIGNATURE 										
SIGNALUS, Spool or privid name or registered agent and this F equipmble. (NOTE: Registered Agent Signature required whon representing) DATE										
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10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/	CHANGES TO OF	FICERS AND D	IRECTOR	S IN 11	
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TITLE MANE STREET ADDRESS GITY-ST-ZP		□ Delete	TITLE NAME STREE CITY-I	T A00RESS			C	Change	☐ Addâtion	
TITLE RAME STREET ADDRESS CETY-ST-SP		□ Delafe	TITLE NAME STREET	T ADDRESS ST-ZLP			C	Change	Addition	
TITLE MAME STREET ADDRESS CITY-ST-ZIP		☐ Cettile	017Y-	T ADDREES				Change	Addition	
12. Thereby cartify 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 suppliemental report is type, and accurate and trust my significant chall have the same legal affect as if made under cath; that I am an officer or director of the corporation or the receiver or insteed on powered 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 differ like ampowered. SIGNATURE: Company RES.										
~!~!T(!	SIGNATURE AND TYPED OR	PRINTED HAME OF BROWNS OFFICER OF	DIRECTO	ж		049	Ceys	nu Phone d		