

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 27, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000128450																																										
1. Entity Name EDDIE ROBERTS CONSTRUCTION, INC.																																										
Principal Place of Business 9092 SEAFAIR LANE TALLAHASSEE, FL 32317	Mailing Address 9092 SEAFAIR LANE TALLAHASSEE, FL 32317	 02172006 No Chg-P CR2E034 (11/05) <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 60%; padding: 2px;">4. FEI Number 20-0375250</td><td style="width: 40%; padding: 2px;">Applied For Not Applicable</td></tr><tr><td colspan="2" style="padding: 2px;">5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required</td></tr></table>	4. FEI Number 20-0375250	Applied For Not Applicable	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 ROBERTS, EDDIE 9092 SEAFAIR LANE TALLAHASSEE, FL 32317		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when renouncing)</small> DATE _____																																										
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																								
10. OFFICERS AND DIRECTORS <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 15%; padding: 2px;">TITLE</td><td style="padding: 2px;">P</td></tr><tr><td style="padding: 2px;">NAME</td><td style="padding: 2px;">ROBERTS, EDDIE</td></tr><tr><td style="padding: 2px;">STREET ADDRESS</td><td style="padding: 2px;">9092 SEAFAIR LANE</td></tr><tr><td style="padding: 2px;">CITY - ST - ZIP</td><td style="padding: 2px;">TALLAHASSEE, FL 32317</td></tr><tr><td style="padding: 2px;">TITLE</td><td></td></tr><tr><td style="padding: 2px;">NAME</td><td></td></tr><tr><td style="padding: 2px;">STREET ADDRESS</td><td></td></tr><tr><td style="padding: 2px;">CITY - ST - ZIP</td><td></td></tr><tr><td style="padding: 2px;">TITLE</td><td></td></tr><tr><td style="padding: 2px;">NAME</td><td></td></tr><tr><td style="padding: 2px;">STREET ADDRESS</td><td></td></tr><tr><td style="padding: 2px;">CITY - ST - ZIP</td><td></td></tr><tr><td style="padding: 2px;">TITLE</td><td></td></tr><tr><td style="padding: 2px;">NAME</td><td></td></tr><tr><td style="padding: 2px;">STREET ADDRESS</td><td></td></tr><tr><td style="padding: 2px;">CITY - ST - ZIP</td><td></td></tr><tr><td style="padding: 2px;">TITLE</td><td></td></tr><tr><td style="padding: 2px;">NAME</td><td></td></tr><tr><td style="padding: 2px;">STREET ADDRESS</td><td></td></tr><tr><td style="padding: 2px;">CITY - ST - ZIP</td><td></td></tr></table>		TITLE	P	NAME	ROBERTS, EDDIE	STREET ADDRESS	9092 SEAFAIR LANE	CITY - ST - ZIP	TALLAHASSEE, FL 32317	TITLE		NAME		STREET ADDRESS		CITY - ST - ZIP		TITLE		NAME		STREET ADDRESS		CITY - ST - ZIP		TITLE		NAME		STREET ADDRESS		CITY - ST - ZIP		TITLE		NAME		STREET ADDRESS		CITY - ST - ZIP		DO NOT WRITE IN THIS SPACE <div style="text-align: left; margin-top: 10px;">1800000448751 03/09/06-80025-019 150.00</div>
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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 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: <u>Eddie Roberts EDDIE ROBERTS PRESIDENT</u> 2/17/06 850-877-8409 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone</small>																																										