


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2007 8:00 am
Secretary of State

04-17-2007 90049 014 ***150.00

DOCUMENT # P03000134025 1. Entity Name SAWYER CONSTRUCTION SERVICES INC	
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Principal Place of Business 1071 HIGHWAY 173 GRACEVILLE, FL 32440	Mailing Address 1071 HIGHWAY 173 GRACEVILLE, FL 32440
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DO NOT WRITE IN THIS SPACE

Registered Agent Sawyer, Johnny 1071 Highway 173 Graceville, FL 32440	DO NOT WRITE IN THIS SPACE
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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 Johnny Sawyer DATE 4-6-07
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 After May 1, 2007 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		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P SAWYER, JOHNNY 1071 HWY 173 GRACEVILLE, FL 32440	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP SAWYER, SCOT 1156 SELMA CHURCH RD GRACEVILLE, FL 32440	
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		

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: Johnny Sawyer DATE 4-6-07 DAYTIME PHONE # 850-243-4154
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #