2006 FOR PROFIT CORPORATION

FILED **ANNUAL REPORT** Jan 31, 2006 08:00 AN DOCUMENT # P03000135801 Secretary of State NOWELL CONSTRUCTION OF NORTHWEST FLORIDA, INC. Principal Place of Business Mailing Address 6333 LITTLE DIRT ROAD 6333 LITTLE DIRT ROAD PANAMA CITY, FL 32404 PANAMA CITY, FL 32404 CR2E034 (11/05) 01052006 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0721794 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent NOWELL, V J III DO NOT WRITE 6333 LITTLE DIRT RD PANAMA CITY, FL 32404 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 1 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 retristating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution, Added to Fees After May 1, 2006 Fee will be \$550.00

10. OFFICERS AND DIRECTORS TITLE NOWELL, V J III NAME 6333 LITTLE DIRT RD U00000408464 02/08/06-80060-010 150.00 STREET ADDRESS CITY-ST-ZIP PANAMA CITY, FL 32404 TITLE NAME STREET ADURESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SI-7IP

12. Thereby 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

SIGNATURE:

IND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR