2006 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P03000135833

1. Entity Name
JIMMY WHITE CONSTRUCTION, INC.

Principal Place of Business	Mailing Address
1823 BANANA ROAD LAKELAND, FL 33810	1823 BANANA ROAD LAKELAND, FL 33810

DO NOT WRITE IN THIS SPACE

07242006.   No Chg-P   CR2E034 (11/05)

4. FEI Number		Applied For
20-0415067		Not Applicable

5. Certificate of Status Desired ☐ | **$8.75** Additional Fee Required

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6. Name and Address of Current Registered Agent

WHITE, JIMMY L
1823 BANANA ROAD
LAKELAND, FL 33810

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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 _Jimmy L White_   DATE _8-2-06_

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00 **Due by September 6, 2006**	**9.** Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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10. OFFICERS AND DIRECTORS

TITLE	D
NAME	WHITE, JIMMY L
STREET ADDRESS	1823 BANANA ROAD
CITY-ST-ZIP	LAKELAND, FL 33810

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

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08/07/06-80006-014 150.00

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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: _Jimmy L White_   _8-3-06_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #