

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000140099

FILED
Apr 21, 2005
Secretary of State

Entity Name: BUILDER SERVICES, INC. OF NORTH FLORIDA

Current Principal Place of Business:

8535 BAYMEADOWS ROAD
SUITE 15
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

8535 BAYMEADOWS ROAD
SUITE 15
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 56-2420469 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HOLBROOK, H. LEON III
ONE INDEPENDENT DRIVE
SUITE 2301
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SPIVEY, DONALD R
Address: 8535 BAYMEADOWS ROAD, SUITE 15
City-St-Zip: JACKSONVILLE, FL 32256

Title: D () Delete
Name: BENT, VERNON L
Address: 8535 BAYMEADOWS ROAD, SUITE 15
City-St-Zip: JACKSONVILLE, FL 32256

Title: D () Delete
Name: WILKERSON, GUY W
Address: 8535 BAYMEADOWS ROAD, SUITE 15
City-St-Zip: JACKSONVILLE, FL 32256

Title: D () Delete
Name: PRINCE, JOHN
Address: 8535 BAYMEADOWS ROAD, SUITE 18
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONALD SPIVEY

CEO

04/21/2005

Electronic Signature of Signing Officer or Director

_____ Date