2006 FOR PROFIT CORPORATION

FILED ANNUAL REPORT May 24, 2006 08:00 AM Secretary of State DOCUMENT # P0300015 151 1. Entity Name ANTHONY A. WHITNEY POOL PLASTERING, INC. Principal Place of Business Malling Address 5480 SCHENK AVE UNIT B15 123 OCEAN SPRAY AVE ROCKLEDGE, FL 32955 SATELLITE BCH, FL 32937 CR2E034 (11/05) 05192008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 33-1079215 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 5. Name and Address of Current Registered Agent WHITNEY, ANTHONY A DO NOT WRITE 123 OCEAN SPRAY AVE SATELLITE BCH, FL 32937 IN THIS SPACE 6. 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent agnoture required when remetating) DATE 9. Election Campaign Financing FILE NOW!!! FEE !\$ \$150.00 **\$5.00** May Be in accordance with s. 607.193(2)(b), F.S., the Due by September 5, 2006 Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. OFFICERS AND DIRECTORS 10 UUOUOOS65951 05/24/06-80002-005 150.00 me MAME WHITNEY, ANTHONY A STREET ADDRESS 123 OCEAN SPRAY AVE CITY-ST-ZP SATELLITE BCH, FL 32937 BYLE NAME STREET ADORESS CITY-ST-ZIP NAME STREET ADORESS DO NOT WRITE CITY-ST-ZP

12. I hereby 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 with an address, with all other like empowered.

SIGNATURE:

TITLE

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZP

IN THIS SPACE