


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Sep 06, 2005 8:00 am**  
**Secretary of State**

09-06-2005 90132 005 \*\*\*150.00

<b>DOCUMENT # P04000026850</b>	
1. Entity Name <b>COVENANT CONTRACTING OF THE FIRST COAST, INC.</b>	

Principal Place of Business <b>1753 W. 45TH STREET JACKSONVILLE, FL 32208</b>	Mailing Address <b>1753 W. 45TH STREET JACKSONVILLE, FL 32208</b>
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2. Principal Place of Business <b>1308 West 45th ST.</b>	3. Mailing Address <b>P.O. Box 12099</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State <b>Jacksonville, Florida</b>	City & State <b>Jacksonville, Florida</b>
Zip <b>32209</b>	Zip <b>32209</b>
Country <b>Duval</b>	Country <b>Duval</b>

08192005 Chg-P CR2E034 (10/03)

4. FEI Number <b>20-0712509</b>	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
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6. Name and Address of Current Registered Agent <b>STEPHEN E. TILLEY, CPA 4465 BAYMEADOWS RD. STE. 3 JACKSONVILLE, FL 32217</b>	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
<b>FL</b>	Zip Code

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	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	DATE
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<b>FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>THOMAS, ROY SR.</b>	NAME	
STREET ADDRESS	<b>1649 EL PRADO RD. #8</b>	STREET ADDRESS	
CITY-ST-ZIP	<b>JACKSONVILLE, FL 32216</b>	CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>THOMAS, ROY III</b>	NAME	
STREET ADDRESS	<b>9644 DEVONSHIRE BLVD.</b>	STREET ADDRESS	
CITY-ST-ZIP	<b>JACKSONVILLE, FL 32208</b>	CITY-ST-ZIP	
TITLE	T <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>HAMMOND, ROBERT L</b>	NAME	
STREET ADDRESS	<b>665 DAY AVE.</b>	STREET ADDRESS	
CITY-ST-ZIP	<b>JACKSONVILLE, FL 32205</b>	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify 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 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: 	8-31-2005	768-9507
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #

(904)



*"Our Word is Our Bond"*

ATTACHMENT

520064896  
04000026855  
**COVENANT CONTRACTING**  
OF THE FIRST COAST, INC.  
P.O. BOX 12099  
JACKSONVILLE, FLORIDA 32209  
904-765-9507(OFFICE) 904-765-4814(FAX)  
CG-C057762

AUGUST 30, 2005

TO WHOM IT MAY CONCERN:

WE HERE AT COVENANT CONTRACTING OF THE FIRST COAST ARE WRITING THIS STATEMENT TO WAIVE LATE FEE. THE REASON OF THIS LETTER IS THAT WE NEVER RECEIVED THE FIRST ANNUAL REPORT NOTICE. WE ONLY RECEIVED THE NOTICE OF INTENT TO DISSOLVE, WHICH WAS THE FINAL NOTICE. PLEASE TAKE THIS MATTER INCONSIDERATION FOR WAVING THE LATE FEE.

THANK YOU

—ROY THOMAS  
PRESIDENT

CC: DIVISION of CORPORATIONS