2008 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Apr 28, 2008 08:00 AN Secretary of State **DOCUMENT # P04000028125** 1. Entity Name J.D. ROSE CONSTRUCTION, INC. Principal Place of Business Mailing Address 1348 DRAGON HEAD DRIVE 1348 DRAGON HEAD DRIVE VALRICO, FL 33594 VALRICO, FL 33594 04252008 No Cha-P CR2F034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 74-3115850 Not Applicable \$8,75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent ROSE, JEFFREY D DO NOT WRITE 1348 DRAGON HEAD DRIVE VALRICO, FL 33594 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (MOTE: Registered Agent signature required when reinstating) U00000927643 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 \$5.00 May Be დ5/20/08-80114-015 150.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE ROSE, JEFFREY D NAME STREET ADDRESS 1348 DRAGON HEAD DRIVE CITY-ST-ZIP VALRICO, FL 33594 TITLE NAME STREET ADDRESS CITY-ST-ZIP THE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 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 earl; that I am an officer or director of the corporation or the receiver or fuster employered 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 attachin

ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED