

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000036018

**FILED**  
**Apr 30, 2006**  
**Secretary of State**

**Entity Name:** DESMOND CONSTRUCTION SERVICES, INC.

**Current Principal Place of Business:**

2002 E AUSTRALIA WAY APT 68  
CLEARWATER, FL 33763

**New Principal Place of Business:**

2002 AUSTRALIA WAY EAST  
68  
CLEARWATER, FL 33763

**Current Mailing Address:**

2519 MCMULLEN BOOTH RD  
510-120  
CLEARWATER, FL 33761

**New Mailing Address:**

2002 AUSTRALIA WAY EAST  
68  
CLEARWATER, FL 33763 US

**FEI Number:** 86-1097959

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DESMOND, SAMUEL W  
2002 E AUSTRALIA WAY APT 68  
CLEARWATER, FL 33763 US

**Name and Address of New Registered Agent:**

DESMOND, SAMUEL W  
2002 AUSTRALIA WAY EAST  
68  
CLEARWATER, FL 33763 US

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: \_\_\_\_\_

04/30/2006

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: DESMOND, SAMUEL W  
Address: 2002 E AUSTRALIA WAY APT 68  
City-St-Zip: CLEARWATER, FL 33763

Title: VP ( ) Delete  
Name: MARIEL, DESMOND  
Address: 2002 AUSTRALIA WAY EAST #68  
City-St-Zip: CLEARWATER, FL 33763

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: DESMOND, SAMUEL W  
Address: 2002 AUSTRALIA WAY EAST APT 68  
City-St-Zip: CLEARWATER, FL 33763

Title: VP (X) Change ( ) Addition  
Name: MARIEL, DESMOND  
Address: 2002 AUSTRALIA WAY EAST APT 68  
City-St-Zip: CLEARWATER, FL 33763

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: SAMUEL W. DESMOND

PD

04/30/2006

Electronic Signature of Signing Officer or Director

Date