

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000099994

FILED
Feb 09, 2006
Secretary of State

Entity Name: BUILDERS PROFESSIONAL SERVICES, INC.

Current Principal Place of Business:

1628 SAN MARCO BLVD., STE. 9A
JACKSONVILLE, FL 322073074

New Principal Place of Business:

9310 OLD KINGS ROAD SOUTH
SUITE 1303
JACKSONVILLE, FL 32257

Current Mailing Address:

1628 SAN MARCO BLVD., STE. 9A
JACKSONVILLE, FL 322073074

New Mailing Address:

9310 OLD KINGS ROAD SOUTH
SUITE 1303
JACKSONVILLE, FL 32257

FEI Number: 33-1097755

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURNETT, HOWARD
12818 HUNTLEY MANOR DR
JACKSONVILLE, FL 32224 US

Name and Address of New Registered Agent:

WILLIAMS, DENNIS
29 LAKE JULIA DRIVE SOUTH
PONTE VEDRA, FL 32082 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: DENNIS WILLIAMS

02/09/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BURNETT, HOWARD
Address: 12818 HUNTLEY MANOR DR
City-St-Zip: JACKSONVILLE, FL 32224

Title: D () Delete
Name: WILLIAMS, DENNIS M
Address: 151 SAWGRASS CORNERS DR., #103
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D () Delete
Name: TACCATI, SCOTT
Address: 12901 BIGGIN CHURCH RD
City-St-Zip: JACKSONVILLE, FL 32224

Title: D (X) Delete
Name: COGER, CARL SR
Address: 8584 OLD PLANK RD.
City-St-Zip: JACKSONVILLE, FL 32220

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/VP (X) Change () Addition
Name: WILLIAMS, DENNIS
Address: 29 LAKE JULIA DRIVE SOUTH
City-St-Zip: PONTE VEDRA, FL 32082

Title: D/P (X) Change () Addition
Name: COGER, CARL M
Address: 17436 DRAGGLE LANE
City-St-Zip: BRYCEVILLE, FL 32009

Title: D/ST (X) Change () Addition
Name: TACCATI, SCOTT
Address: 12901 BIGGIN CHURCH RD
City-St-Zip: JACKSONVILLE, FL 32224

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 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: DENNIS WILLIAMS

VP

02/09/2006

Electronic Signature of Signing Officer or Director

Date