

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000127019

FILED
Jul 01, 2005
Secretary of State

Entity Name: CONSTRUCTION SERVICES OF BAY COUNTY INC.

Current Principal Place of Business:

633 N 9TH PLAZA
PARKER, FL 32404

New Principal Place of Business:

Current Mailing Address:

633 N 9TH PLAZA
PARKER, FL 32404

New Mailing Address:

FEI Number: 16-4307026

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HASKINS, JAMES
633 N 9TH PLAZA
PARKER, FL 32404 US

Name and Address of New Registered Agent:

HASKINS, JAMES A
633 N 9TH PLAZA
PARKER, FL 32404 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: JAMES A. HASKINS

07/01/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: HASKINS, JAMES
Address: 633 N 9TH PLAZA
City-St-Zip: PARKER, FL 32404

Title: V () Delete
Name: HASKINS, JIMMY D
Address: 633 N 9TH PLAZA
City-St-Zip: PARKER, FL 32404

Title: S () Delete
Name: ELDRIDGE, ALLEN
Address: 307 BAYOU AVE
City-St-Zip: SPRINGFIELD, FL 32401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: HASKINS, JAMES A
Address: 633 N 9TH PLAZA
City-St-Zip: PARKER, FL 32404

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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 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: JAMES A HASKINS

PT

07/01/2005

Electronic Signature of Signing Officer or Director

Date