

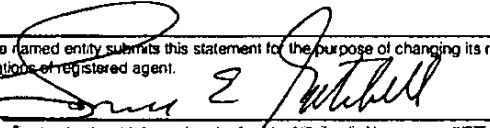
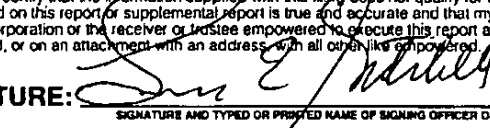
# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

07-11-2005 90116003 \*\*\*150.00

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                      |                                                                                                                                                                                                                               |                                                                   |
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| <b>DOCUMENT # P04000141977</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                      |                                                                                                                                              |                                                                   |
| 1. Entity Name<br><b>CUSTOM CONSTRUCTION CONSULTANTS, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                      |                                                                                                                                                                                                                               |                                                                   |
| Principal Place of Business<br><b>1535 VISTA LAKE CIR<br/>W. MELBOURNE, FL 32904</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                      | Mailing Address<br><b>1535 VISTA LAKE CIR<br/>W. MELBOURNE, FL 32904</b>                                                                                                                                                      |                                                                   |
| 2. Principal Place of Business<br><b>2815 W. New Haven Ave</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                      | 3. Mailing Address<br><b>2815 W. New Haven Ave.</b>                                                                                                                                                                           |                                                                   |
| Suite, Apt. #, etc.<br><b>304</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                      | Suite, Apt. #, etc.<br><b>304</b>                                                                                                                                                                                             |                                                                   |
| City & State<br><b>W. Melbourne, Florida</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                      | City & State<br><b>W. Melbourne, Florida</b>                                                                                                                                                                                  |                                                                   |
| Zip<br><b>32904</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Country<br><b>USA</b>                                                                                                | Zip<br><b>32904</b>                                                                                                                                                                                                           | Country<br><b>USA</b>                                             |
| 6. Name and Address of Current Registered Agent<br><b>GATCHELL, LAWRENCE E<br/>1535 VISTA LAKE CIR<br/>W. MELBOURNE, FL 32904</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                      | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br><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.<br>SIGNATURE:  <b>LAWRENCE E GATCHELL</b> DATE: <b>7-7-05</b><br><small>Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating)</small>                                                                                                        |                                                                                                                      |                                                                                                                                                                                                                               |                                                                   |
| <b>FILE NOW!!! FEE IS \$150.00<br/>Due by September 7, 2005</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                      | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be<br/>Added to Fees</b><br>In accordance with s. 607.193(2)(b), F.S., the<br>corporation did not receive the prior notice. |                                                                   |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                      | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11                                                                                                                                                                         |                                                                   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>D<br/>GATCHELL, LAWRENCE E<br/>1535 VISTA LAKE CIR<br/>W. MELBOURNE, FL 32904</b> <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <input type="checkbox"/> Delete                                                                                      | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <input type="checkbox"/> Delete                                                                                      | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <input type="checkbox"/> Delete                                                                                      | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <input type="checkbox"/> Delete                                                                                      | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <input type="checkbox"/> Delete                                                                                      | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 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:  <b>LAWRENCE E GATCHELL</b> DATE: <b>7-7-05</b><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                      | Date: <b>321-121-7707</b>                                                                                                                                                                                                     |                                                                   |

PRES

B. Mitchell JUL 20 2005