2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2005
Secretary of State

DOCUMENT# P04000143646

Entity Name: AARON REEVES CONSTRUCTION, INC.

Current Principal Place of Business:

109 CADILLAC AVENUE
NICEVILLE, FL 32578

New Principal Place of Business:

Current Mailing Address:

109 CADILLAC AVENUE
NICEVILLE, FL 32578

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

REEVES, AARON
109 CADILLAC AVENUE
NICEVILLE, FL 32578 US

Name and Address of New Registered Agent:

REEVES, AARON CEO
109 CADILLAC AVENUE
NICEVILLE, FL 32578 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: AARON REEVES 02/09/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PS ( ) Delete
Name: REEVES, AARON
Address: 109 CADILLAC AVENUE
City-St-Zip: NICEVILLE, FL 32578

Title: V ( ) Delete
Name: FRALEY, MELVIN
Address: 109 CADILLAC AVENUE
City-St-Zip: NICEVILLE, FL 32578

Title: V (X) Delete
Name: COOPER, JASON
Address: 109 CADILLAC AVENUE
City-St-Zip: NICEVILLE, FL 32578

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: V ( ) Change (X) Addition
Name: CHARLES, MASSINGILL
Address: 707 NUTMEG AVE.
City-St-Zip: NIICVILLE, FL 32578

Title: V ( ) Change (X) Addition
Name: JOHN, MCDONALD
Address: 707 NUTMEG
City-St-Zip: NICVILLE, FL 32578

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: AARON REEVES CEO 02/09/2005
Electronic Signature of Signing Officer or Director Date