


2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 20, 2006 8:00 am
Secretary of State

05-08-2006 90271 020 ***150.00

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1st MOORE CR2E034 (10/05)

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| DOCUMENT # P04000144368 | | | |  | |
| 1. Entity Name ANDREWS BUILDERS, INC. | | | | | |
| Principal Place of Business 2304 NORTH "E" STREET PENSACOLA FL 32501 | | | Mailing Address 2304 NORTH "E" STREET PENSACOLA FL 32501 | | |
| 2. Principal Place of Business | | | 3. Mailing Address | | |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | |
| City & State | | | City & State | | |
| Zip | Country | Zip | Country | 4. FEI Number 59-0011223 Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/> | |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | | | | | |
| 6. Name and Address of Current Registered Agent ANDREWS, CHARLES R 2322 NORTH "E" STREET PENSACOLA FL 32501 | | | | 7. Name and Address of New Registered Agent Name JERRY HUNTER, JR., CEO Street Address (P.O. Box Number is Not Acceptable) 1700 FIREMAN DRIVE City PENSACOLA FL Zip Code 32505 | |
| 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. SIGNATURE _____ DATE 3-25-06 <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when restoring)</small> | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State | | | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | |
| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D ANDREWS, CHARLES R 2322 NORTH "E" STREET PENSACOLA FL 32501 <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | Good Works Baptist Church, Inc. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 1700 FIREMAN DR PENSACOLA, FL 32505 (Director) | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | A AUDRE-DAVIE, GABRIEL 8020 SONG BIRDS DRIVE PENSACOLA FL 32503 <input checked="" type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | ST HUNTER, JERRY 1822 ST. CATHERINE AVE. PENSACOLA FL 32601-1046 <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | |
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| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: _____ | | | 4-28-06 (850) 438-3175 | | |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | | | <small>Date Daytime Phone #</small> | | |