
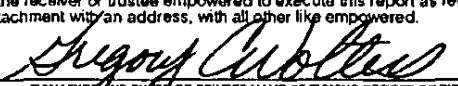


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 24, 2005 8:00 am
Secretary of State

07-29-2005 90011 023 ***150.00

DOCUMENT # P04000165214 1. Entity Name GCW CONSTRUCTION, INC.			
Principal Place of Business 823 ARDENLEIGH DRIVE ORLANDO FL 32828 US		Mailing Address 823 ARDENLEIGH DRIVE ORLANDO FL 32828 US	
2. Principal Place of Business 823 ARDENLEIGH DR Suite, Apt. #, etc.		3. Mailing Address 823 ARDENLEIGH DR Suite, Apt. #, etc.	
City & State ORL FLORIDA Zip 32828		City & State ORL FL 32828 Zip ORANG	
4. FEI Number 20-2003620		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 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 WOLTERS, GREGORY 823 ARDENLEIGH DRIVE ORLANDO FL 32828	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS 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: 		Date _____ Daytime Phone # _____	

ATTACHMENT

06020375
#P04000165214

G.C.W. CONSTRUCTION INC.

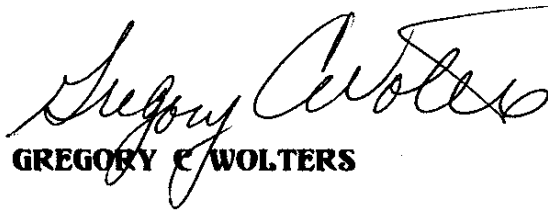
823 ARDENLEIGH DR.
ORLANDO, FLORIDA 32828

TO WHOM IT MAY CONCERN

I RECEIVED THIS ATTACHED LETTER IN THE MAIL AND AM TRYING TO UNDERSTAND WHY I AM BEING ASKED TO PAY THIS EXTRA \$400.00 DOLLAR LATE FEE. I DID RECEIVE A POST CARD LETTER FROM YOU OF INTENT TO DISSOLVE, THAT CARD WAS SENT BACK TO YOU. AND AT NO OTHER TIME PRIOR TO THIS WAS I SENT INFORMATION OF THIS MATTER.

PLEASE CALL IF YOU NEED TO SPEAK TO ME 407-340-7049

THANK YOU


GREGORY C. WOLTERS





ATTACHMENT

66026375

FLORIDA DEPARTMENT OF STATE

Glenda E. Hood

Secretary of State

August 2, 2005

GCW CONSTRUCTION, INC.
223 ARCEN LEIGH DR
ORLANDO, FL 32828 US

Subject: **GCW CONSTRUCTION, INC.**

Reference Number: **P04000165214**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The fee to file the profit annual report/uniform business report is \$150.00 plus \$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please add an additional \$8.75.

There is a balance due of \$400.00.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/LS

ANNUAL REPORTS SECTION