

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000005970

FILED
Jan 24, 2007
Secretary of State

Entity Name: KENT NICHOLS CONSTRUCTION, INC.

Current Principal Place of Business:

3506 N MONROE STREET
TALLAHASSEE, FL 32303

New Principal Place of Business:

BLOXHAM CUTOFF
TALLAHASSEE, FL 32310

Current Mailing Address:

3506 N MONROE STREET
TALLAHASSEE, FL 32303

New Mailing Address:

POST OFFICE BOX 20433
TALLAHASSEE, FL 32316

FEI Number: 20-2154919

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NICHOLS, KAREN
3506 NORTH MONROE STREET
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

NICHOLS, KAREN
BLOXHAM CUTOFF
TALLAHASSEE, FL 32310 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: KAREN NICHOLS

01/24/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NICHOLS, KENT
Address: 3506 N MONROE STREET
City-St-Zip: TALLAHASSEE, FL 32303

Title: V () Delete
Name: CONE, RAYMOND C
Address: 3506 N MONROE STREET
City-St-Zip: TALLAHASSEE, FL 32303

Title: S () Delete
Name: NICHOLS, KAREN
Address: 3506 N MONROE STREET
City-St-Zip: TALLAHASSEE, FL 32303

Title: T () Delete
Name: NICHOLS, KAREN
Address: 3506 N MONROE STREET
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NICHOLS, KENT
Address: POST OFFICE BOX 20433
City-St-Zip: TALLAHASSEE, FL 32316

Title: V (X) Change () Addition
Name: CONE, RAYMOND C
Address: POST OFFICE BOX 20433
City-St-Zip: TALLAHASSEE, FL 32316

Title: S (X) Change () Addition
Name: NICHOLS, KAREN
Address: POST OFFICE BOX 20433
City-St-Zip: TALLAHASSEE, FL 32316

Title: T (X) Change () Addition
Name: NICHOLS, KAREN
Address: POST OFFICE BOX
City-St-Zip: TALLAHASSEE, FL 32316

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: KAREN NICHOLS

S/T

01/24/2007

Electronic Signature of Signing Officer or Director

Date