2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Kelenaw. Brawn

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

Mar 14, 2006 8:00 am DOCUMENT # P05000039984 **Secretary of State** 03-14-2006 90020 015 ***150.00 **ELGIE CONSTRUCTION CORPORATION** Principal Place of Business Mailing Address 378 BAHIA AVE KEY LARGO FL 33037 378 BAHIA AVE KEY LARGO FL 33037 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) 4. FEI Number +12-166/243 Applied For City & State City & State Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BROWN, HELENA W Street Address (P.O. Box Number is Not Acceptable) 378 BAHIA AVE KEY LARGO FL 33037 City 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 Signature, typed or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when roinstating) FILE NOW!!! FEE IS \$150.00. 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME BROWN, HELENA W NAME STREET ADDRESS 378 BAHIA AVE STREET ADDRESS CITY-ST-ZIP KEY LARGO FL 33037 CITY-ST-ZIP BROWN, ELFIE, MIR TITLE ☐ Delete TITLE ☐ Change Addition HAME 378 BAULA AVE HEY LARGO FL 33037 MARKE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DIRECTOR THE ☐ Detete THLE ☐ Change Addition test Maurice Lee, ir. sei Beachwood cove NAME NAME STREET ADDRESS STREET ADDRESS Cordova, TN 38018 CITY-ST-7IP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP ☐ Defete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 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.

FILED