

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000128752

Entity Name: YOST CONSTRUCTION INC

FILED
May 16, 2006
Secretary of State

Current Principal Place of Business:

10949 SW 151ST PLACE
DUNNELLON, FL 34432

New Principal Place of Business:

Current Mailing Address:

10949 SW 151ST PLACE
DUNNELLON, FL 34432

New Mailing Address:

FEI Number: 13-4307789

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YOST, JAMES W
10949 SW 151ST PLACE
DUNNELLON, FL 34432 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: YOST, JAMES W
Address: 10949 SW 151ST PLACE
City-St-Zip: DUNNELLON, FL 34432

Title: VP (X) Delete
Name: YOST, PHILLIP
Address: 10949 SW 151ST PLACE
City-St-Zip: DUNNELLON, FL 34432

Title: SEC (X) Delete
Name: YOST, HOLLY M
Address: 10949 SW 151ST PLACE
City-St-Zip: DUNNELLON, FL 34432

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:

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: JAMES W. YOST

P

05/16/2006

Electronic Signature of Signing Officer or Director

Date