2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000151726

FILED Apr 27, 2006 Secretary of State

Entity Name: AMERICAN CONSTRUCTION ASSOCIATES AND DEVELOPMENT GROUP, INC.

Current Principal Place of Business: New Principal Place of Business: 16628 89TH PLACE N LOXAHATCHEE, FL 33470 **Current Mailing Address: New Mailing Address:** 16628 89TH PLACE N LOXAHATCHEE, FL 33470 FEI Number: 20-3766941 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: AGNES S. HOLLINGSHEAD, P.A. 3600 SOUTH CONGRESS AVE., SUITE K BOYNTON BCH, FL 33426 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition EARHART, JON LEE Name: Name: 4648 N. HWY. 441 Address: Address: City-St-Zip: OKEECHOBEE, FL 33972 City-St-Zip: Title: Title: () Delete () Change () Addition Name: EARHART, COLLEEN C Name: 4648 N. HWY. 441 Address: Address: OKEECHOBEE, FL 33972 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition SOUTHWART, DAVID A Name: Name: 135 SEMINOLE LAKES DR. Address: Address: City-St-Zip: ROYAL PALM BCH, FL 33411 City-St-Zip: Title: () Delete Title: () Change () Addition MEYER, CHARLES M Name: Name: Address: 16628 89TH PLACE N Address: City-St-Zip: LOXAHATCHEE, FL 33470 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: CHARLES M MEYER T 04/27/2006