2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 20, 2006 8:00 am Secretary of State DOCUMENT # P05000153039 02-20-2006 90052 006 ***150.00 1. Entity Name COMPLIANCE CONSTRUCTION CORPORATION Principal Place of Business Mailing Address 30 S NEW YORK AVENUE SUITE 200 301 S NEW YORK AVENUE SUITE 200 WINTER PARK FL 32789 WINTER PARK FL 32789 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) Applied For City & State City & State 4. FEI Number 20-3811234 Not Applicable Zip Country Zip Country \$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 WHITE, ROBERT Street Address (P.O. Box Number is Not Acceptable) 558 W NEW ENGLAND AVENUE SUITE 240 WINTER PARK FL 32789 Zip Code 8. The above named entity submits this statement for the purpose of ging the registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept (NOTE; Registered Agent signature required when reinstating) 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. Vice- President ☐ Delete Change TITLE TITLE Robert R. Horton MAME HOLD, ROBERT P NAME 301 5. New York No. Ste 200 301 S. NEW YORK AVENUE, SUITE 200 STREET ADDRESS STREET ADDRESS WINTER PARK FL 32789 CITY-ST-ZIP CITY-ST-7/P Winter Park, FL 32789 TITLE ☐ Addition TITLE VPST Delete NAME HAME MORA, CONRAD A STREET ADDRESS STREET ADDRESS 301 S. NEW YORK AVENUE, SUITE 200 WINTER PARK FL 32789 CITY-ST-7/P ☐ Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-St-7IP TITLE ☐ Channe ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7iP ☐ Change Addition TITLE ☐ Defete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition

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 accruate 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 the corporation or the receiver or trustee empowered the corporation or the receiver or trustee empowered.

CITY-ST-ZIP

TITLE NAME STREET ADDRESS

☐ Delete

SIGNATURE:

STREET ADDRESS

CITY-ST-7IP

FILED