


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 24, 2006 8:00 am**  
**Secretary of State**

04-24-2006 90371 009 \*\*\*150.00

<b>DOCUMENT # P25775</b> 1. Entity Name <b>LIBERTY DESIGN &amp; CONSTRUCTION CO., INC.</b>	
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Principal Place of Business <b>868 PLANTATION WAY MONTGOMERY, AL 36117</b>	Mailing Address <b>868 PLANTATION WAY MONTGOMERY, AL 36117</b>
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**DO NOT WRITE IN THIS SPACE**

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01052006 No Chg-P CR2E034 (11/05)

4. FEI Number <b>63-0939097</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**JOHNSON, WARREN GENE  
1135 BALBOA AVE  
PANAMA CITY, FL 32401**

**DO NOT WRITE  
IN THIS SPACE**

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 Warren Gene Johnson DATE 4/12/06

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT JOHNSON, WARREN GENE 6601 HOLLIS DR ** 6131 Meridian Lane MONTGOMERY, AL 36117
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS JOHNSON, ALICE 6601 HOLLIS DR ** 6131 Meridian Lane MONTGOMERY, AL 36117
TITLE NAME STREET ADDRESS CITY-ST-ZIP	** New Address
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

**SIGNATURE:** Warren Gene Johnson 4/12/06 334/271-0734

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #