2006 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 24, 2006 8:00 am Secretary of State DOCUMENT # P94000031715 04-24-2006 90361 041 ***150.00 O'NEILL & O'NEILL SERVICES, INC. Principal Place of Business Mailing Address 1009 21ST ST N P O BOX 50975 60023734 JACKSONVILLE BEACH, FL 32250 JACKSONVILLE BEACH, FL 32240 02022006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3242664 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent O'NEILL, KAREN B DO NOT WRITE 1009 21 STREET NORTH JACKSONVILLE BEACH, FL 32250 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_ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. \Box Added to Fees 10. OFFICERS AND DIRECTORS TITLE PD O'NEILL, KAREN B STREET ADDRESS 1009 21 STREET N CITY-SI-ZIP JACKSONVILLE BEACH, FL 32250 VPD TITLE NAME O'NEILL, JAMES D STREET ADDRESS 1009 21 STREET N JACKSONVILLE BEACH, FL 32250 CITY-ST-ZIP JOHNSON, DEBORAH D NAME STREET ADDRESS 3621 NW 39TH PLACE DO NOT WRITE CITY-ST-ZIP GAINESVILLE, FL 32605 TIRE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP BILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. Thereby certify that the information supplied with this filling 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:

STREET ADDRESS

4/2/06

549-3100

FILED