2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2009
Secretary of State

DOCUMENT# P94000088989

Entity Name: COORDINATED CONSTRUCTION, INC.

Current Principal Place of Business:

6130 NAPA WOODS WAY
NAPLES, FL 34116

New Principal Place of Business:

Current Mailing Address:

6130 NAPA WOODS WAY
NAPLES, FL 34116

New Mailing Address:

FEI Number: 65-0550680 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FULLER, JOE M
6130 10TH AVE. SW
NAPLES, FL 34116 US

Name and Address of New Registered Agent:

FULLER, JOE M
6130 NAPPA WOODS WAY
NAPLES, FL 34116 US

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: 04/20/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: FULLER, JOE M
Address: 6130 10TH AVE. SW
City-St-Zip: NAPLES, FL 34116

Title: V ( ) Delete
Name: INGHAM, JAMES R
Address: PO BOX 775 (603 JONES AVE.)
City-St-Zip: TYBEE ISLAND, GA 31328

Title: ST ( ) Delete
Name: FULLER, JOE M
Address: 6130 10TH AVE. SW
City-St-Zip: NAPLES, FL 34116

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: FULLER, JOE M
Address: 6130 NAPPA WOODS WAY
City-St-Zip: NAPLES, FL 34116

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change ( ) Addition
Name: FULLER, JOE M
Address: 6130 NAPPA WOODS WAY
City-St-Zip: NAPLES, FL 34116

I hereby certify that the information supplied with this filing does not qualify 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: JOE M. FULLER PRES 04/20/2009
Electronic Signature of Signing Officer or Director — Date