


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 14, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P95000025126</b> 1. Entity Name ADVANCED COMMERCIAL CONTRACTORS, INC.	
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Principal Place of Business 2766 E. ORANGE AVE. EUSTIS, FL 32726	Mailing Address 2766 E. ORANGE AVE. EUSTIS, FL 32726
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**DO NOT WRITE IN THIS SPACE**

01052005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3304942	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

6. Name and Address of Current Registered Agent

HOLLEY, WAYNE  
222 EASTRIDGE DR.  
EUSTIS, FL 32726

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	UN00000263683 03/14/05-80101-023 158.75
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HOLLEY, WAYNE 222 EASTRIDGE DR. EUSTIS, FL 32726
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HOLLEY, CHERYL 222 EASTRIDGE DR. EUSTIS, FL 32726
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HOLLEY, CHERYL 222 EASTRIDGE DR EUSTIS, FL 32726
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HOLLEY, WAYNE 222 EASTRIDGE DR EUSTIS, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V POONIT, JANARDANA 1732 FOX CREEK LANE APOPKA, FL 32703
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 exemption stated in Section 119.07(3)(i), 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:**  **K Wayne Holley, Pres 1/20/05(352)589-1200**

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