'2006 FOR PROFIT CORPORATION

ANNUAL REPORT

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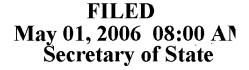
Principal Place of Business

DEAN BUILDING SYSTEMS, INC.



Mailing Address

2444 MCGREGOR BLVD 2444 MCGREGOR BLVD FT MYERS, FL 33901 FT MYERS, FL 33901



Fee Required



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03112006 No Chg-P CR2E034 (11/05) Applied For 4. FEI Number 65-0571840 Not Applicable \$8.75 Additional 5. Certificate of Status Desired

6. Name and Address of Current Registered Agent

EDWARDS, CHARLES B JR. 2069 FIRST STREET SUITE 100 FT. MYERS, FL 33902

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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 4 applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campalgn Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS 10. TITLE DEAN, CHARLES W NAME STREET ADDRESS 2444 MCGREGOR BLVD CITY-ST-ZIP FT MYERS, FL 33901 TITLE FISHER, KENNETH G NAME STREET ADDRESS 12 COVENTRY DR. SE CITY-ST-71P ROME, GA 30161 TITLE NAME FISHER, JULIE D STREET ADDRESS 12 COVENTRY DR. SE CITY-ST-ZIP ROME, GA 30161 TITLE EDWARDS, CHARLOTTE NAME STREET ADDRESS 12922 KEDLESTON CIRCLE FT MYERS, FL 33912 CITY-ST-ZIP TITLE DEAN, KAREN NAME STREET ADDRESS 2444 MCGREGOR BLVD CITY - ST - ZIP FORT MYERS, FL 33901 III) F DEAN, NANETTE NAME STREET ADDRESS 12842 KEDLESTON CIRCLE CITY - ST - ZIP FORT MYERS, FL. 33912

U00000552234 05/15/06-80003-009 150.00

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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 eath, 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

SIGNATURE: 2

Julie D. GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR