

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000065690

FILED
Apr 29, 2006
Secretary of State

Entity Name: RIGHT ON CONSTRUCTION, INC.

Current Principal Place of Business:

123 GOLFVIEW DRIVE
SUITE #3
LAKE WORTH, FL 33460

New Principal Place of Business:

Current Mailing Address:

123 GOLFVIEW DRIVE
SUITE #3
LAKE WORTH, FL 33460

New Mailing Address:

FEI Number: 65-0612649 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEBER, MARK
2 N.W. 24TH STREET
DELRAY BEACH, FL 33444 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: BARBAREE, CRAIG VP
Address: 5666 2ND ROAD
City-St-Zip: LAKE WORTH, FL 33467

Title: D () Delete
Name: BARBAREE, CRAIG T D
Address: 5666 2ND ROAD
City-St-Zip: LAKE WORTH, FL 33463

Title: D () Delete
Name: WEBER, MARK D
Address: 2 N.W. 24TH STREET
City-St-Zip: DELRAY BEACH, FL 33444

Title: P () Delete
Name: WEBER, MARK P
Address: 2 N.W. 24TH STREET
City-St-Zip: DELRAY BEACH, FL 33444

Title: S () Delete
Name: WEBER, MARK S
Address: 2 N.W. 24TH STREET
City-St-Zip: DELRAY BEACH, FL 33444

Title: T () Delete
Name: BARBAREE, CRAIG T T
Address: 5666 2ND ROAD
City-St-Zip: LAKE WORTH, FL 33463

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: BARBAREE, CRAIG T D
Address: 5666 2ND ROAD
City-St-Zip: LAKE WORTH, FL 33467

Title: D (X) Change () Addition
Name: WEBER, MARK C D
Address: 2 N.W. 24TH STREET
City-St-Zip: DELRAY BEACH, FL 33444

Title: P (X) Change () Addition
Name: WEBER, MARK C P
Address: 2 N.W. 24TH STREET
City-St-Zip: DELRAY BEACH, FL 33444

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

Title: T (X) Change () Addition
Name: BARBAREE, CRAIG T T
Address: 5666 2ND ROAD
City-St-Zip: LAKE WORTH, FL 33467

I hereby certify that the information supplied with this filing does not qualify for the 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: MARK WEBER

P

04/29/2006

Electronic Signature of Signing Officer or Director

_____ Date