


2006 FOR PROFIT CORPORATION ANNUAL REPORT

APPROVAL
AND
FILED

112

06 SEP 15 PM 2:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000093195 1. Entity Name A & M CONSTRUCTION OF N.W. FLA., INC.					
Principal Place of Business 212 PASCHEL AVENUE MARY ESTHER, FL 32569 US			Mailing Address 212 PASCHEL AVENUE MARY ESTHER, FL 32569 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-3348438	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
DAUGHERTY, ALEXANDER 212 PASCHEL AVENUE MARY ESTHER, FL 32569			Name Street Address (P.O. Box Number is Not Acceptable) <div style="border: 1px solid black; padding: 2px; text-align: center;"> 700075941037 09/19/06--01020--002 **150.00 </div> City <div style="text-align: right;">FL</div> Zip Code		
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 <u><i>Alex Daugherty</i></u> <u>Alex DAUGHERTY</u> <u>9-10-06</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P	<input type="checkbox"/> Delete	TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DAUGHERTY, ALEXANDER K		NAME	Joseph DAUGHERTY	
STREET ADDRESS	212 PASCHEL AVENUE		STREET ADDRESS	212 Paschel Ave	
CITY-ST-ZIP	MARY ESTHER, FL 32569		CITY-ST-ZIP	MARY ESTHER, FLA, 32569	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE		
NAME	UHLENDORF, JOHN F		NAME		
STREET ADDRESS	2581 AVENIDA DE SOL		STREET ADDRESS		
CITY-ST-ZIP	NAVARRE, FL 32566		CITY-ST-ZIP		
TITLE	VT	<input type="checkbox"/> Delete	TITLE		
NAME	DAUGHERTY, GLEN M		NAME		
STREET ADDRESS	212 PASCHEL AVENUE		STREET ADDRESS		
CITY-ST-ZIP	MARY ESTHER, FL 32569		CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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 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: <u><i>Alex Daugherty</i></u> <u>Alex DAUGHERTY</u> <u>9-10-06</u> <u>850-803-0650</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

9/15/06

Document # P95000093195

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Dear Sir or Ma'am

I did not receive the Annual Report
in order to file that document, will you
please waive that penalty fee.

Thank you

Alec Dany

Pres. of ATM Construction
of N.W. FIA, Inc.