2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

FILED Apr 29, 2008 08:00 AN Secretary of State **DOCUMENT # P96000035721** 1. Entity Name WALTERS CONSTRUCTION SERVICES, INC. Principal Place of Business Mailing Address 1003 TECH DRIVE 1003 TECH DRIVE LYNN HAVEN, FL 32444 LYNN HAVEN, FL. 32444 US 04282008 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3381058 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WA:TERS, ELIZABETH J DO NOT WRITE 221 MCKENZIE AVENUE PANAMA CITY, FL 32401 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 Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 П Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 U00000931214 OFFICERS AND DIRECTORS 10. U5/22/U8-80006-005 150.00 WALTERS, LEON L JR NAME 1003 TECH DRIVE STREET ADDRESS CITY-ST-2IP LYNN HAVEN, FL 32444 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP ШÆ STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS 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 appetdress, with all other like empowered.

TED NAME OF SIGNING OFFICER OR DIRECTOR

850-26**5**-%%