2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000059139

Entity Name: CROSS CONSTRUCTION SERVICES, INC.

FILED May 01, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
25221 STATE ROAD 54 WEST LUTZ, FL 33559							
Current Mailing Address:				New Mailing Address:			
25221 STATE ROAD 54 W LUTZ, FL 33559							
FEI Number:	59-3423008	FEI Number Applied For ()	FEI Numl	ber Not Appli	cable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:		
HOLCOMB, VICTOR W 106 S TAMPANIA AVE SUITE 200 TAMPA, FL 33609 US				HOLCOMB, VICTOR W 201 N. ARMENIA AVENUE TAMPA, FL 33609 US			
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:					05/01/2006		
Electronic Signature of Registered Agent				Date			
		3(2)(b), F.S., the corporation did not r	receive th	e prior notice).		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	V () HOPKINS, DWI 28555 S.R. WE WESLEY CHAF	ST	1	Title: Name: Address: City-St-Zip:	CEO HOPKINS, E 29010 TUPF WESLEY C		
Title: Name: Address: City-St-Zip:	ARNEY, RUSSE	EN OAKS CIRCLE	1	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	ST () ROBINSON, DO 30534 SR 54 W WESLEY CHAF	/EST	1	Title: Name: Address: City-St-Zip:		(X) Change () Addition , DONNA J LEBROOK WAY HAPEL, FL 33543	
Title: Name: Address: City-St-Zip:	V () HANSON, ANTH 29334 LAUGHR WESLEY CHAF	IDGE PLACE	1	Title: Name: Address: City-St-Zip:		(X) Change () Addition NTHONY V SHRIDGE PLACE HAPEL, FL 33544	
Title: Name: Address: City-St-Zip:	V () RIEGER, RAYM 29316 DOWNY WESLEY CHAF	PLACE	1	Title: Name: Address: City-St-Zip:		(X) Change () Addition E, ETHAN T NDLER TRACE HAPEL, FL 33544	

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: RUSSELL E. ARNEY PRES 05/01/2006