

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000062731

FILED  
Apr 09, 2006  
Secretary of State

Entity Name: ACCESS CONSTRUCTION TEAM, INC.

## Current Principal Place of Business:

201 N. ARMENIA  
TAMPA, FL 33609 US

## New Principal Place of Business:

818 SW 3RD AVENUE  
SUITE 262  
PORTLAND, OR 97204 US

## Current Mailing Address:

818 SW 3RD AVENUE  
# 262  
PORTLAND, OR 97204 US

## New Mailing Address:

818 SW 3RD AVENUE  
SUITE 262  
PORTLAND, OR 97204 US

FEI Number: 59-3400966

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GAMBLE, DEAN  
201 N. ARMENIA  
TAMPA, FL 33609 US

## Name and Address of New Registered Agent:

HOLCOMB, VICTOR  
201 N. ARMENIA AVENUE  
SUITE #262  
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: VICTOR HOLCOMB

04/09/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: GAMBLE, DEAN  
Address: 201 N. ARMENIA  
City-St-Zip: TAMPA, FL 33602

Title: VP ( ) Delete  
Name: GAMBLE, JULIE  
Address: 201 N. ARMENIA  
City-St-Zip: TAMPA, FL 33602

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: GAMBLE, DEAN  
Address: 818 SW 3RD AVENUE, #262  
City-St-Zip: PORTLAND, OR 97204

Title: VP (X) Change ( ) Addition  
Name: GAMBLE, JULIE  
Address: 818 SW 3RD AVENUE, #262  
City-St-Zip: PORTLAND, OR 97204

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: JULIE GAMBLE

VP

04/09/2006

Electronic Signature of Signing Officer or Director

Date