

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Sep 06, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # P96000098346 1. Entity Name FLORIDA BUILDING & INVESTMENTS, INC.	
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Principal Place of Business 608 S. TYNDALL PARKWAY PANAMA CITY, FL 32401	Mailing Address 608 S. TYNDALL PARKWAY PANAMA CITY, FL 32401
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DO NOT WRITE IN THIS SPACE



08302006 No Chg-P CR2E034 (11/05)

4. FEI Number 79-3431384	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  GIOIELLO, JOHN L ESQ 402 JENKS AVENUE PANAMA CITY, FL 32401	DO NOT WRITE IN THIS SPACE
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$550.00</b> <b>Due by September 6, 2006</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RUPP, STEVEN N PO BOX 6437 PANAMA CITY, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000576249  
09/06/06-80003-013 550.00

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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: Steven N. Rupp Steven Rupp 9/5/06 850 913 0534

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #