

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2006 8:00 am
Secretary of State

01-12-2006 90164 013 ***150.00

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01062006 Chg-P CR2E034 (11/05)

DOCUMENT # P97000006174 1. Entity Name NDC CONSTRUCTION COMPANY					
Principal Place of Business 1001 3RD AVENUE WEST SUITE 600 BRADENTON, FL 34205			Mailing Address 1001 3RD AVENUE WEST SUITE 600 BRADENTON, FL 34205		
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 59-3423927				Applied For <input type="checkbox"/> Not Applicable	
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		
WALTERS, CLIFFORD 802 11TH STREET WEST BRADENTON, FL 34205			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;">FL Zip Code</div>		
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 reinstating) <small>Signature, typed or printed name of registered agent and title if applicable. DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		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	PS <input type="checkbox"/> Delete		TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ALLEN, RONALD J		NAME		
STREET ADDRESS	1001 3RD AVE W, SUITE 410		STREET ADDRESS	<i>1001 3rd AVE. W. Suite 600</i>	
CITY-ST-ZIP	BRADENTON, FL 34205		CITY-ST-ZIP		
TITLE	TAS <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CONNOR, DIANE G		NAME		
STREET ADDRESS	4415 5TH AVE		STREET ADDRESS		
CITY-ST-ZIP	PITTSBURG, PA 15213		CITY-ST-ZIP		
TITLE	VP <input type="checkbox"/> Delete		TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	VANDERGRIFT, LEE		NAME		
STREET ADDRESS	1001 3RD AVE W, SUITE 410		STREET ADDRESS	<i>1001 3rd AVE. W. Suite 600</i>	
CITY-ST-ZIP	BRADENTON, FL 34205		CITY-ST-ZIP		
TITLE	VP <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MASON, MARTIN		NAME		
STREET ADDRESS	4415 FIFTH AVENUE		STREET ADDRESS		
CITY-ST-ZIP	PITTSBURGH, PA 15213		CITY-ST-ZIP		
TITLE	EVP <input type="checkbox"/> Delete		TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HUGGINS, GARY L		NAME		
STREET ADDRESS	1001 3RD AVENUE W STE 410		STREET ADDRESS	<i>1001 3rd AVE. W. Suite 600</i>	
CITY-ST-ZIP	BRADENTON, FL 34205		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: _____			1-6-2006 941-747-1062 <small>Date Daytime Phone #</small>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					