2005 FOR PROFIT CORPORATION

May 26, 2005 08:00 AM Secretary of State **ANNUAL REPORT** DOCUMENT # P97000020195 PHILIP WHITNEY CONSTRUCTION, INC. Principal Place of Business Mailing Áddress 590 LONDONDERRY CIRCLE SE 590 LONDONDERRY CIRCLE SE PALM BAY, FL 32909 US PALM BAY, FL 32909 US 05212005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3431914 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WHITNEY, PHILIP DO NOT WRITE 590 LONDONDERRY CIR. S.E. PALM BAY, FL 32909 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, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FRE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution, Added to Fees corporation did not receive the prior notice. Due by September 7, 2005 10. DP TITLE U00000368409 05/26/05-80006-017 150.00 NAME WHITNEY, PHILIP STREET ADDRESS 590 LONDONDERRY CIR. SE CITY - ST - ZIP PALM BAY, FL 32909 DST TITLE WHITNEY, KATHY NAME 509 LONDONDERRY CIR. SE STREET ADDRESS CITY-ST-ZIP PALM BAY, FL 32909 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY - ST - ZIP NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). 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:

CITY - ST- ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

Daytime Phone #

FILED