


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 06, 2006 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # P98000052163 1. Entity Name VANCO CONSTRUCTION & SUPPLY, INC. |  |
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| Principal Place of Business 2483 NE 2ND AVE BOCA RATON, FL 33431 | Mailing Address 2483 NE 2ND AVE BOCA RATON, FL 33431 |
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DO NOT WRITE IN THIS SPACE



07022006 No Chg-P CR2E034 (11/05)

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| 4. FEI Number 65-0842983 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$8.75 Additional Fees Required |

6. Name and Address of Current Registered Agent

VANCE, FRED
2483 NE 2ND AVE
BOCA RATON, FL 33431

**DO NOT WRITE
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: _____ (NOTE: Registered Agent signature required when reinstating)
Signature, typed or printed name of registered agent and title if applicable. DATE: 07/06/06-80014-011 158.75

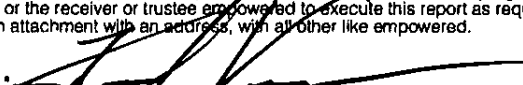
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|---|---|---|
| FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. |
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10. OFFICERS AND DIRECTORS

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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D VANCE, FRED 2483 NE 2ND AVE BOCA RATON, FL 33431 |
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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:  7-3-06 (561) 361-8469
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #