2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000078002

Address:

City-St-Zip:

30338 DEER RUN

DADE CITY, FL 33523

Entity Name: BUILDING SCIENCES NETWORK, INC.

FILED Apr 30, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 13703 17TH ST DADE CITY, FL 33525 **Current Mailing Address: New Mailing Address:** 13703 17TH ST DADE CITY, FL 33525 FEI Number: 59-3538043 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ALLEN, C. RICHARD 30338 DEER RUN DADE CITY, FL 33523 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition ALLEN, C. RICHARD ALLEN, C. RICHARD Name: Name: 30338 DEER RUN 30338 DEER RUN Address: Address: City-St-Zip: DADE CITY, FL 33523 City-St-Zip: DADE CITY, FL 33523 Title: Title: () Delete (X) Change () Addition Name: ALLEN, KATHERINE Name: ALLEN, KATHERINE 30338 DEER RUN 30338 DEER RUN Address: Address: DADE CITY, FL 33523 DADE CITY, FL 33523 City-St-Zip: City-St-Zip: Title: Title: (X) Delete () Change () Addition MANN, LESTER Name: Name: 30338 DEER RUN Address: Address: City-St-Zip: DADE CITY, FL 33523 City-St-Zip: Title: (X) Delete Title: () Change () Addition ALLEN, TIMOTHY C Name: Name:

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.

Address:

City-St-Zip:

Ρ SIGNATURE: C. RICHARD ALLEN 04/30/2006