2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P98000095165

Entity Name: DIVCO CONSTRUCTION CORP

FILED Aug 23, 2006 Secretary of State

Littly Na	ille. Divoco c	ONSTRUCTION CORF.			
Current P	rincipal Place	e of Business:	New Principal Place	New Principal Place of Business:	
6628 WILL NAPLES, I	LOW PARK DI FL 34109	RIVE			
Current N	lailing Addre	ss:	New Mailing Addre	New Mailing Address:	
6628 WILL NAPLES, I	OW PARK DI FL 34109	RIVE			
FEI Number	: 59-3559612	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of (Current Registered Agent:	Name and Address	of New Registered Agent:	
GERRY, WILSON PORTER WRIGHT MORRIS & ARTHUR 5801 PELICON BAY BLVD, SUITE 300 NAPLES, FL 34108 US			5801 PELICAN BAY	WILSON, GARY K PORTER, WRIGHT, MORRIS & ARTHUR LLP 5801 PELICAN BAY BLVD, SUITE 300 NAPLES, FL 34108 US	
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,	
SIGNATURE: GARY K. WILSON				08/23/2006	
	Electio	nic Signature of Registered Age	ent.	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (EASTMAN, MA 6628 WILLOW NAPLES, FL 3	PARK DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S (KAUFFMAN, S 6628 WILLOW NAPLES, FL 3	PARK DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CEO (KAUFFMAN, S 6628 WILLOW NAPLES, FL 3	PARK DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (FOSTER, ALAI 6628 WILLOW NAPLES, FL 3	PARK DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (GLACE, RON 6628 WILLOW NAPLES, FL 3		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (GRACE, RON 6628 WILLOW NAPLES, FL 3		Title: Name: Address: City-St-Zip:	() Change () Addition	

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.

SIGNATURE: GARY WILSON 08/23/2006 DIR Date