2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Apr 13, 2005 8:00 am Secretary of State **DOCUMENT # P99000029956** 04-13-2005 90028 047 ***150.00 1. Entity Name HAINES CONTRACTING, INC. Principal Place of Business Mailing Address 20030904 16 MARBELLA CT 16 MARBELLA CT PALM COAST, FL 32137 PALM COAST, FL 32137 03042005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3563752 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HAINES, ROBERT L DO NOT WRITE 4320 BARQUERO COURT, EAS JACKSONVILLE, FL 32217 IN THIS SPACE ドノ 3ス13ク PAIM CUAST 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 registe SIGNATURE. 9. Election Campaign Financing FILE NOWIII FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE 16 MOLDE MA C. NAME HAINES, ROBERT L IM COAST FI 4320 BARQUERO COURT, EAST STREET ADDRESS マスノスク CITY-ST-ZIP JACKSONVILLE, FL 32217 TITLE STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE 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)(i), 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

FILED