2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S77257

FILED Apr 28, 2006 Secretary of State

Entity Name: ALAQUA CONSTRUCTION, INC.

Current Principal Place of Business:		New Principal Place of Business:		
2596 CR 5 BUSHNEL	664 .L, NC 33512			
Current Mailing Address:		New Mailing Address:		
PO BOX 2 WEBSTER	64 R, FL 33597			
El Number	: 59-3080907	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	l Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:
COSSON, 2596 CR 5	LETHA L 564			
BUSHNEL	L, FL 33513 named entity s	US ubmits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,
BUSHNEL The above n the State	L, FL 33513 named entity se of Florida.		ourpose of changing its registere	ed office or registered agent, or both,
BUSHNEL The above n the Stat	L, FL 33513 named entity se of Florida. RE:			ed office or registered agent, or both, Date
BUSHNEL The above In the Stati BIGNATU	L, FL 33513 named entity se of Florida. RE: Electron	ubmits this statement for the p		
BUSHNEL The above n the State BIGNATU Election Ca	L, FL 33513 named entity se of Florida. RE: Electron	ubmits this statement for the place of Signature of Registered Agr	ent	
BUSHNEL The above In the State BIGNATU Election Ca	e named entity se of Florida. RE: Electron mpaign Financing S AND DIRECT	ubmits this statement for the place of Registered Agric Signature of Registered Agric Trust Fund Contribution (). FORS: Delete A L	ent	Date
the above in the State SIGNATU SIGNATU	e named entity se of Florida. RE: Electron mpaign Financing S AND DIRECT PST () COSSON, LETH 2596 CR 564 BUSHNELL, FL	ubmits this statement for the place of Registered Agric Signature of Registered Agric Trust Fund Contribution (). FORS: Delete IA L 33513 Delete IAM T	ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

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: LETHA L. COSSON PST 04/28/2006