2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # S93786

1. Entity Name DRUMMOND CONSTRUCTION, INC.



FILED
Apr 24, 2006 08:00 AM
Secretary of State

Principal Place of Business 2945 LAKE PINELOCH BLVD ORLANDO, FL 32806 US Mailing Address

2945 LAKE PINELOCH BLVD ORLANDO, FL 32806 US



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

04172006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3092912 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

N, GREGORY M

WILSON, GREGORY M 29 E PINE STREET ORLANDO, FL 32801

DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the pions of registered agent.	urpose of changing its registered o	iffice or registered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title in	f applicable (NOTE Registered Age	ant signature required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS -		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DRUMMOND, GLENN I. 2945 LAKE PINELOCH BLVD ORLANDO, FL			U00000529999 05/05/06-80098-022 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN .	THIS SPACE
TITLE NAME STREET ADDRESS CITY+ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
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				

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

MEMATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-17-06

4078437454

Daytime Phone #