

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000078726

FILED
Feb 27, 2006
Secretary of State

Entity Name: SABAL PALM CONSTRUCTION, INC.

Current Principal Place of Business:

830 NE POP TILTON PLACE
JENSEN BEACH, FL 34957

New Principal Place of Business:

Current Mailing Address:

830 NE POP TILTON PLACE
JENSEN BEACH, FL 34957

New Mailing Address:

FEI Number: 54-2064961 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VOSTERS, DOUGLAS B
830 NE POP TILTON PLACE
JENSEN BEACH, FL 34957 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: VOSTERS, DOUGLAS B
Address: 1489 NE 23RD TERRACE
City-St-Zip: JENSEN BEACH, FL 34957

Title: D () Delete
Name: LOGSDON, SCOTT W
Address: 1805 NW FORK RD.
City-St-Zip: STUART, FL 34994

Title: VS () Delete
Name: POLHEMUS, BRYAN
Address: 1384 NW COCONUT PT. RD.
City-St-Zip: STUART, FL 34994

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: VOSTERS, DOUGLAS B
Address: 110 SOUTH MANOR AVE
City-St-Zip: STUART, FL 34994 US

Title: T (X) Change () Addition
Name: LOGSDON, SCOTT W
Address: 1805 NW FORK RD.
City-St-Zip: STUART, FL 34994

Title: VS (X) Change () Addition
Name: POLHEMUS, BRYAN
Address: 1384 NW COCONUT PT. RD.
City-St-Zip: STUART, FL 34994

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: DOUGLAS B VOSTERS

P

02/27/2006

Electronic Signature of Signing Officer or Director

_____ Date