2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02473

FILED Apr 24, 2006 Secretary of State

Entity Na	me: CAJUN C	CONSTRUCTORS, INC.			
Current Principal Place of Business:			New Principal Place of Business:		
	LINE HIGHWA OUGE, LA 708				
Current Mailing Address:			New Mailing Address:		
PO BOX 1 BATON RO	04 OUGE, LA 708	3210104 US			
FEI Number: 72-0733546 FEI Number Applied For ()		FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and	Address o	f New Registered Agent:
1200 S. PI	ORATION SYS NE ISLAND RO ION, FL 33324	DAD			
	named entity : e of Florida.	submits this statement for the	purpose of changing it	s registere	d office or registered agent, or both,
SIGNATU	RE:				
	Electror	nic Signature of Registered Ag	ent		Date
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	GRIGSBBY, L.	FIELD CIRCLE	Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	P () JACOB, JOHN 3381 E LAKES BATON ROUGE	HORE DR	Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	EVPC () GRAVNARD, M 12459 GOODW BATON ROUGE	OOD BLVD.	Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	D () SEXTON, R. G. 6513 PERKINS BATON ROUGE	RD.	Title: Name: Address: City-St-Zip:		() Change () Addition
Title:	ST () Delete	Title:	ST	(X) 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.

Name:

Address:

City-St-Zip:

RECILE, SHANE

GONZALES, LA 70737

6002 JONATHAN ALARIC AVE

SIGNATURE: SHANE RECILE **CFO** 04/24/2006

RECILE, SHANE

GONZALES, LA 70737

6002 JONATHAN ALECIA AVE

Name:

Address:

City-St-Zip: