2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

Feb 22, 2006 8:00 am **Secretary of State DOCUMENT # P94000011357** 02-22-2006 90024 001 ***150.00 FTD CONSTRUCTION, INC. 02-22-2006 90024 002 *****8.75 Principal Place of Business Mailing Address 4315 MUSTANG ROAD 4315 MUSTANG ROAD 66002057 LAKELAND, FL 33801 US LAKELAND, FL 33801 US 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 02092006 Chg-P CR2E034 (11/05) 4. FEI Number Applied For City & State City & State 59-3224191 Not Applicable Zip Country Zio Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DAVIS, FARRIS T Street Address (P.O. Box Number is Not Acceptable) 78 PALM LANÉ DRIVE WINTER HAVEN, FL 33881 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10 11. Addition TITLE Delete TITLE Vice President ☐ Change NAME DAVIS, FARRIS T NAME George H. Scott 78 PALM LANE DRIVE STREET ADDRESS STREET ADDRESS 5170 Ewing Road CITY-ST-ZIP WINTER HAVEN, FL 33881 CITY-ST-ZIP Fort Meade, FL 33841-6664 TITLE ☐ Change ☐ Addition TITLE Delete NAME DAVIS, JANET W. STREET ADDRESS 78 PALM LANE DRIVE STREET ADDRESS CITY-ST-ZIP WINTER HAVEN, FL 33881 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition DAVIS, ALLAN F NAME NAME STREET ADDRESS 201 FISH HAVEN ROAD #54 STREET ADDRESS CITY-ST-ZIP AUBURNDALE, FL 33823 CITY-ST-ZIP ☐ Change Addition NT F Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CiTY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Delete TITLE ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

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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 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.

February 17, 2006