

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006 08:00 AM
Secretary of State

DOCUMENT # 182992			
1. Entity Name J.C. BYRD INVESTMENT & CONTRACTING CO.			
Principal Place of Business 514 BROOKER RD. BRANDON, FL 33511		Mailing Address 514 BROOKER RD. BRANDON, FL 33511	
DO NOT WRITE IN THIS SPACE		04242006 No Chg-P CR2E034 (11/05)	
		4. FEI Number 59-1325216	
		Applied For Not Applicable	
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BYRD, VIRGINIA 514 BROOKER RD. BRANDON, FL 33511		DO NOT WRITE IN THIS SPACE	
6. 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:			
SIGNATURE: <i>Virginia Byrd</i>		DATE: <i>April 24, 2006</i>	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		7. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE	
TITLE	SD		
NAME	BYRD, LILLIAN C		
STREET ADDRESS	1203 GREENVIEW DR.		
CITY-ST-ZIP	LAKELAND, FL		
TITLE	VP		
NAME	BYRD, WILLIAM C.		
STREET ADDRESS	207 WINDSOR DRIVE		
CITY-ST-ZIP	WARNER ROBINS, GA		
TITLE	P		
NAME	BYRD, VIRGINIA		
STREET ADDRESS	514 BROOKER RD		
CITY-ST-ZIP	BRANDON, FL 33511		
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 of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 807, 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: <i>Virginia Byrd</i>		4-24-06 813 6891421	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone	

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05/10/06-80004-023 150.00