

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 424069

FILED  
Apr 30, 2012  
Secretary of State

**Entity Name:** ART, MCBRIDE, CARPENTRY CONTRACTOR, INC.

**Current Principal Place of Business:**

10251 COWLEY ROAD  
RIVERVIEW, FL 33578

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 6709  
SEFFNER, FL 33583 US

**New Mailing Address:**

**FEI Number:** 59-1456847

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MCBRIDE, ARTHUR E  
29671 BAY HEAD ROAD  
DADE CITY, FL 33523 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

**OFFICERS AND DIRECTORS:**

Title: S  
Name: MCBRIDE, PATRICIA E  
Address: 3611 PETTICOAT JCT  
City-St-Zip: VALRICO, FL 33594

Title: PD  
Name: MCBRIDE, ARTHUR E  
Address: 29671 BAY HEAD ROAD  
City-St-Zip: DADE CITY, FL 33523

Title: T  
Name: LAVOIE, TRUDY K  
Address: 3510 MCINTOSH OAKS COURT  
City-St-Zip: DOVER, FL 33527

Title: VP  
Name: MCBRIDE, TIMOTHY  
Address: 2917 PONDEROSA TRAIL  
City-St-Zip: WIMAUMA, FL 33598

I hereby 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 all other like empowered.

SIGNATURE: TRUDY K. LAVOIE

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04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date