


2006 FOR PROFIT CORPORATION ANNUAL REPORT

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

DOCUMENT # F03000001534 1. Entity Name MAYRIDGE CONSTRUCTION COMPANY	
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Principal Place of Business 25101 CHAGRIN BOULEVARD BEACHWOOD, OH 44122	Mailing Address 25101 CHAGRIN BOULEVARD BEACHWOOD, OH 44122
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04202006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 34-0741139	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

DO NOT WRITE
IN THIS SPACE

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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
 After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

000000541118
 05/10/06-80046-005 150.00

10. OFFICERS AND DIRECTORS	
TITLE	DP
NAME	GOLDBERG, LARRY
STREET ADDRESS	25101 CHAGRIN BLVD.
CITY-ST-ZIP	BEACHWOOD, OH 44122
TITLE	DV
NAME	GOLDBERG, JORDAN A
STREET ADDRESS	25101 CHAGRIN BOULEVARD
CITY-ST-ZIP	BEACHWOOD, OH 44122
TITLE	DV
NAME	BELL, ERIC E
STREET ADDRESS	25101 CHAGRIN BOULEVARD
CITY-ST-ZIP	BEACHWOOD, OH 44122
TITLE	T
NAME	JUERGENS, BRUCE
STREET ADDRESS	25101 CHAGRIN BOULEVARD
CITY-ST-ZIP	BEACHWOOD, OH 44122
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE

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.

SIGNATURE: X *Bruce Juergens* Date: X 4/21/06 Daytime Phone #: X 216.831.6100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR