

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000117563 1. Entity Name JOHNNY PITTS CONSTRUCTION, INC.	
--	---

Principal Place of Business
**8994 HICKORY HAMOCK RD
MILTON, FL 32583**

Mailing Address
**4100 PACE LANE
MILTON, FL 32571**



03152006 No Chg-P CR2E034 (11/05)

4. FEI Number 56-2401784	Applied For ☐ Not Applicable
------------------------------------	--

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

WRITE IN THIS SPACE

8. Name and Address of Current Registered Agent

**PITTS, JOHNNY J
4100 PACE LANE
MILTON, FL 32571**

**WRITE
IN THIS SPACE**

9. 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 _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

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

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

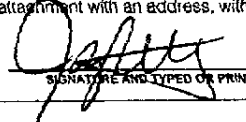
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PITTS, JOHNNY J 8994 HICKORY HAMOCK RD MILTON, FL 32583
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

1100000475398
04/05/06-80014-001 158.75

**WRITE
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:

 **Johnny J. Pitts**

03-16-06 (850) 232-1615

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #