## **2007 FOR PROFIT CORPORATION ANNUAL REPORT**

## DOCUMENT # P03000133288

1. Entity Name

W.E. SANDS CONSTRUCTION, INC.



**FILED** Mar 07, 2007 08:00 AM Secretary of State

Principal Place of Business

11989 CR 223 OXFORD, FL 34484 Mailing Address

11989 CR 223 OXFORD, FL 34484



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

02262007 No Chg-P CR2E034 (11/05)

Applied For 4. FEI Number 74-3109545 Not Applicable \$8.75 Additional 5. Certificate of Status Desired

Fee Required

SANDS, WILLIAM E JR 11989 CR 223 OXFORD, FL 34484

## DO NOT WRITE IN THIS SPACE

<ol><li>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.</li></ol>					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent aignature required when reinstating)  DATE					
FILE NOW!!! FEE IS \$150.00  After May 1, 2007 Fee will be \$550.00  9. Élection Cámpaign Financ			cing	\$5.00 May Be Added to Fees	000000658261 03/15/07-80031-016 150.00
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST SANDS, WILLIAM E JR 11989 CR 223 OXFORD, FL 34484				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SANDS, WILLIAM E JR 11989 CR 223 OXFORD, FL 34484				
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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.					