


# 2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P97000080104						FILED 08 DEC 22 AM 9:25 SECRETARY OF STATE, TALLAHASSEE, FLORIDA	
1. Entity Name ROD WATSON CONSTRUCTION, INC.							
Principal Place of Business 9090 86TH STREET VERO BEACH, FL 32967				Mailing Address 9090 86TH STREET VERO BEACH, FL 32967			
2. Principal Place of Business - No P.O. Box # 953 OLD DIXIE HWY Suite, Apt. #, etc. SUITE B-4			3. Mailing Address 953 OLD DIXIE HWY Suite, Apt. #, etc. SUITE B-4			12102008    Chg-P    CR2E034 (12/06)	
City & State VERO BEACH FL		City & State VERO BEACH, FL		4. FEI Number 65-0779948		Applied For <input type="checkbox"/> Not Applicable	
Zip 32960		Country Indian River		Zip 32960		Country Indian River	
6. Name and Address of Current Registered Agent WATSON, RODNEY R 9090 86TH STREET VERO BEACH, FL 32967				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 953 OLD DIXIE HIGHWAY SUITE B-4 City VERO BEACH    FL    Zip Code 32960			
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____							
Amended AR is \$61.25				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
900139208569 22/08--01054--005 **\$61.25							
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		PTD WATSON, RODNEY R 9090 86TH STREET VERO BEACH, FL 32967 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 953 Old Dixie Highway Suite B-4 Vero Beach, FL 32960	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<del>SB</del> WATSON, DEBRA A 9090 86TH ST VERO BEACH, FL 32967 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition V Patrick Hollingsworth 8125 91st Avenue Vero Beach, FL 32967	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition S Eric Watson 953 Old Dixie Hwy Suite B-4 Vero Beach FL 32960	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: <i>Rodney R. Watson</i>				Rodney R. Watson		Date 12/17/08	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date		Daytime Phone # (772) 532-2199	

DC 12/23