

Apr 28 06 12:19p

MATT MATTHEWS

(239)7755487

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FILED

May 01, 2006 08:00 AM
Secretary of State

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P98000053059

1. Entity Name

GREG ORICK MARINE CONSTRUCTION, INC.



Principal Place of Business

**27171 DRIFTWOOD DR
BONITA SPRINGS, FL 34135**

Mailing Address

**27171 DRIFTWOOD DR
BONITA SPRINGS, FL 34135**



04262006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3517843

Applied For
No. Applicable

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

6. Name and Address of Current Registered Agent

**ORICK, GREG
27171 DRIFTWOOD DRIVE
BONITA SPRINGS, FL 34135**

**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

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

(NOTE: Registered Agent signature is required when re-registering)

DATE

**U00000559589
05/18/06-80004-024 150.00**

**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**

**U00000559589
05/18/06-80004-023 8.75**

10. OFFICERS AND DIRECTORS

TITLE **DP**
NAME **ORICK, GREGORY L**
STREET ADDRESS **27171 DRIFTWOOD DR**
CITY-ST-ZIP **BONITA SPRINGS, FL 34135**

TITLE
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**DO NOT 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

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