

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2008 08:00 AM
Secretary of State

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1. Entity Name
HAMRICK, PERREY, QUINLAN & SMITH BUILDING CORPORATION



Principal Place of Business
**601 12TH ST. W.
 BRADENTON, FL 34205**

Mailing Address
**601 12TH ST. W.
 BRADENTON, FL 34205**

DO NOT WRITE IN THIS SPACE



01082008 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0891993

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**PERREY, PHILIP E
 601 12TH ST. W.
 BRADENTON, FL 34205**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2008 Fee will be \$550.00**

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

U00000782393
 01/15/08-80073-003 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	HAMRICK, MICHAEL M
STREET ADDRESS	601 12TH ST. W.
CITY-ST-ZIP	BRADENTON, FL 34205
TITLE	D
NAME	PERREY, PHILIP E
STREET ADDRESS	601 12TH ST. W.
CITY-ST-ZIP	BRADENTON, FL 34205
TITLE	D
NAME	QUINLAN, JOHN V
STREET ADDRESS	601 12TH ST. W.
CITY-ST-ZIP	BRADENTON, FL 34205
TITLE	D
NAME	SMITH, GILBERT A JR.
STREET ADDRESS	601 12TH ST. W.
CITY-ST-ZIP	BRADENTON, FL 34205
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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.

SIGNATURE: _____ Director **John V. Quinlan** 441 747 1871
 _____ Date **1/8/08** Daytime Phone # _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR