## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # F98000001501

BEN M. RADCLIFF CONTRACTOR, INC.



Principal Place of Business

3456 HALLS MILL ROAD MOBILE, AL 36693

Mailing Address

P.O. BOX 8368 MOBILE, AL 36689-0368

## **FILED** Mar 28, 2006 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

03232006	No Chg-P	CR2E034 (11/05)		
4. FEI Number			Applied F	

63-0419772

4.

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

COBB, GLENNIE J

FRENKEL, PAUL A \_

MOBILE, AL 36693

MOBILE, AL

3456 HALLS MILLL ROAD

3456 HALLS MILLL ROAD

## DO NOT WRITE IN THIS SPACE

		}				
	named entity submits this statement for the pitions of registered agent.	urpose of changing its registered office or i	registered agent, or bo	th, in the State of Florida. I am familiar with, and accep		
SIGNATURE.						
	Signature, typed at printed name of registered agent and title if	epplicable (NOTE: Registered Agent signature	a requir <b>ad when reinstaling)</b>	DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	TORS		<del></del>		
title Yame Street Address City-ST-ZIP	P RADCLIFF JR, BEN M 3456 HALLS MILLL ROAD. MOBILE, AL			U00000483109		
ntle Vame Gircet Address Caty-St-Zip	VCD RADCLIFF, BEN M 3456 HALLS MILLL ROAD MOBILE, AL			04/11/06-80103-006 <b>150.00</b>		
TITLE HAME STREET ADDRESS CIFY-ST-ZIP	D RADCLIFF, JEAN F 3456 HALLS MILLL ROAD MOBILE, AL		DO	NOT WRITE		
INTE	ST CORP CLENINE I		IN THIS SPACE			

12. I hereby certify that the information supplied with this filling 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 it 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 it charged, or on an attachment with an address, with all other the empowered.

c	10	M	ATI	10	<b>C</b>

STREET ACCRESS

CITY-ST-ZIP

CITY-ST-ZIP

NAME STREET ADDRESS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

OF SIGNING OFFICER OR DIRECTOR

3-23-06

251 666 7252

Daytime Phone #

TRES