

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J53561

**FILED**  
**Jan 24, 2014**  
**Secretary of State**  
**CC6467848870**

**Entity Name:** SEVEN GABLES CONSTRUCTION & DESIGN CO.

**Current Principal Place of Business:**

5875 BRADFORDVILLE RD  
TALLAHASSEE, FL 32309

**Current Mailing Address:**

5875 BRADFORDVILLE RD  
TALLAHASSEE, FL 32309 US

**FEI Number:** 59-2753910

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CAREY, SUSAN  
5877 BRADFORDVILLE RD  
TALLAHASSEE, FL 32309 US

*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.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PS  
Name CAREY, SUSAN  
Address 5877 BRADFORDVILLE RD  
City-State-Zip: TALLAHASSEE FL 32309

Title TD  
Name CAREY, SUSAN  
Address 5877 BRADFORDVILLE RD  
City-State-Zip: TALLAHASSEE FL 32309

Title STD  
Name CAREY, SUSAN  
Address 5877 BRADFORDVILLE RD  
City-State-Zip: TALLAHASSEE FL 32309

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** SUSAN CAREY

**PRESIDENT**

**01/24/2014**

Electronic Signature of Signing Officer/Director Detail

Date