## 2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000046693

Entity Name: J. RAYMOND CONSTRUCTION CORP.

**Current Principal Place of Business:** 

465 WEST WARREN AVENUE LONGWOOD, FL 32750

**Current Mailing Address:** 

465 WEST WARREN AVENUE LONGWOOD, FL 32750

FEI Number: 59-3655762 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

**B&C CORPORATE SERVICES OF CENTRAL FLORIDA** 390 N. ORANGE AVENUE **SUITE 1400** ORLANDO, FL 32801 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

**FILED** Jan 25, 2017

**Secretary of State** 

CC3492693166

## Officer/Director Detail:

**PRES** Title Title **SRVP** 

Name SOFARELLI, JOHN RSR Name SUDDETH, JAMES R Address 465 WEST WARREN AVENUE Address 465 WEST WARREN AVE City-State-Zip: LONGWOOD FL 32750 City-State-Zip: LONGWOOD FL 32750

Title **PARTNER** Title **PARTNER** ROEMER, JON Name Name CRAMER, DANIEL

Address 465 WEST WARREN AVENUE Address 465 WEST WARREN AVENUE City-State-Zip: LONGWOOD FL 32750 City-State-Zip: LONGWOOD FL 32750

Title **PARTNER** Title PARTNER/CFO

Name MELLEN, SCOTT Name BORGIA, THOMAS

Address 465 WEST WARREN AVENUE Address 465 WEST WARREN AVENUE City-State-Zip: LONGWOOD FL 32750

City-State-Zip: LONGWOOD FL 32750

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: THOMAS BORGIA

PARTNER/CFO

01/25/2017