

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000052756

**Entity Name:** HIGHRISE SPECIALTY CONSTRUCTION INC.

**Current Principal Place of Business:**

9224 CYPRESS DR. N.  
FT. MYERS, FL 33967

**Current Mailing Address:**

P.O. BOX 9372  
NAPLES, FL 34101 US

**FEI Number: 27-4474090**

**Certificate of Status Desired: No**

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

FONTAINE, PAUL  
9224 CYPRESS DR. N.  
FT. MYERS, FL 33967 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	P	Title	VP
Name	FONTAINE, PAUL	Name	LEAPER, MARIE
Address	9224 CYPRESS DR. N.	Address	9033 CYPRESS DR. S.
City-State-Zip:	FT. MYERS FL 33967	City-State-Zip:	FT. MYERS FL 33967

*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: PAUL FONTAINE**

**PRES**

**03/17/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date