

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 07, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # 175490**

1. Entity Name  
**GREENHUT CONSTRUCTION COMPANY, INC.**



Principal Place of Business  
**23 SOUTH A STREET  
PENSACOLA, FL 32501**

Mailing Address  
**P O BOX 12603  
PENSACOLA, FL 32591-2603 US**



01032008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-0701137**

Applied For

Not Applicable

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

**6. Name and Address of Current Registered Agent**

**GREENHUT, DUDLEY H  
23 SOUTH A STREET  
PENSACOLA, FL 32501**

**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

Signature, typed or printed name of registered agent and title if applicable.

(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**

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**CDP  
GREENHUT, DUDLEY H C.D.P  
2095 HIGHWAY 97 SOUTH  
CANTONMENT, FL 32533**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VD  
GREENHUT, CONNIE J VP  
2095 HIGHWAY 97 SOUTH  
CANTONMENT, FL 32533**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**TDS  
REYES, RACHEL D  
28 SOUTH "A" ST  
PENSACOLA, FL 32501**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**V  
NORTHUP, LAWRENCE S VP  
1620 N 14TH AVENUE  
PENSACOLA, FL 32503**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**V  
SPELLMAN, KEVIN F VP  
23 SOUTH "A" STREET  
PENSACOLA, FL 32501**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

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01/07/08-80005-013 150.00

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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1/4/2008**

Date

**(850) 433-5421**

Daytime Phone #