2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 228996

Name:

Address:

City-St-Zip:

CADDELL, DANIEL O III

30827 FARIVIEW AVE

TAVARES, FL 32778

Entity Name: COVEN CONSTRUCTION CO.

FILED Feb 08, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
PO BOX 7 TAVARES	33 , FL 32778	US	10215 JOANIE'S RUN N LEESBURG, FL 34788	N US	
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
PO BOX 7 TAVARES	33 , FL 32778	US			
FEI Number	: 59-0876592	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	l Address of	Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
The above	e of Florida.		ourpose of changing its registered	office or registered agent, or both,	
	Electro	onic Signature of Registered Age	ent	Date	
Election Car	mpaign Financi	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PVST (COVEN, MIKE 10215 JOANII LEESBURG, I	E'S RUN	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name: Address: City-St-Zip:	VP (COVEN, DAVI 10215 JOANII LEESBURG, I	E'S RUN	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title:	VP () Delete	Title· () Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: MIKE COVEN PRES 02/08/2008