

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 13, 2008 08:00 AM
Secretary of State

DOCUMENT # 344700

1. Entity Name
RON ORF CONCRETE CONTRACTOR, INC.



Principal Place of Business

**1830 HYPOLUXO RD.
SUITE 125-B
LANTANA, FL 33462**

Mailing Address

**1830 HYPOLUXO RD.
SUITE 125-B
LANTANA, FL 33462**



01312008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1268276	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**ORF, RON
1830 HYPOLUXO ROAD
SUITE 125-B
LANTANA, FL 33462**

**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

000000925898
02/21/08-80028-022 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	ORF, RON
STREET ADDRESS	1830 HYPOLUXO # 125- B
CITY- ST- ZIP	LANTANA, FL 33462

TITLE	VS
NAME	ORF, SANDRA
STREET ADDRESS	1830 HYPOLUXO # 125- B
CITY- ST- ZIP	LANTANA, FL 33462

TITLE	T
NAME	ORF, MATTHEW
STREET ADDRESS	1830 HYPOLUXO # 125- B
CITY- ST- ZIP	LANTANA, FL 33462

TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: Matthew F. Orf
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-8-2008
Date Daytime Phone #

Block # 8021
2-11-2008