## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 353659** 

FILED Feb 23, 2011 Secretary of State

Entity Name: NORTH FLORIDA ERECTION COMPANY, INC.

Current Principal Place of Business: New Principal Place of Business:

1816 BUCKMAN ST. 1824 BUCKMAN ST.

P. O. BOX 3832 JACKSONVILLE, FL 32206 JACKSONVILLE, FL 32206

Current Mailing Address: New Mailing Address:

1816 BUCKMAN ST. 1824 BUCKMAN ST.

P. O. BOX 3832 JACKSONVILLE, FL 32206 JACKSONVILLE, FL 32206

FEI Number: 59-1282833 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CORBIN, PETER REED

121 W. FORSYTH ST., SUITE 1000

JACKSONVILLE, FL 32202

US

CORBIN, PETER REED

225 WATER STREET

SUITE 710

JACKSONVILLE, FL 32202 US

JACKSONVILLE, FL 32202 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: 02/23/2011

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PD

Name: BURNSED, J L

Address: 10486 BURNSED-CRWFORD RD. City-St-Zip: GLEN ST. MARY, FL 32040

Title: VD

Name: COLSON, JOHNNY C Address: 204 SAN RAFAEL ST City-St-Zip: ST AUGUSTINE, FL

Title: SD

Name: CRAWFORD, KELLY E

Address: 10964 BURNSED-CRAWFORD ROAD

City-St-Zip: GLEN ST. MARY, FL 32040

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: J. L. BURNSED PRES 02/23/2011