

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 24, 2005 8:00 am
Secretary of State

01-24-2005 90038 017 ***150.00

DOCUMENT # 355597

1. Entity Name
R.W. SUMMERS RAILROAD CONTRACTOR, INC.



Principal Place of Business
3693 EAST GANDY ROAD
BARTOW, FL 33830 US

Mailing Address
3693 E GANDY RD
BARTOW, FL 33830 US

40004734



DO NOT WRITE IN THIS SPACE

01052005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-1278131

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

MERRITT, CHARLES D
3407 HIGHLAND ST
BARTOW, FL 33830

**DO NOT WRITE
IN THIS SPACE**

B. 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, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PCD
NAME MERRITT, CHARLES D
STREET ADDRESS 3407 HIGHLAND ST
CITY-ST-ZIP BARTOW, FL 00000,

TITLE VSD
NAME STINSON, JEAN S.
STREET ADDRESS 200 EL CAMINO DR. #312
CITY-ST-ZIP WINTER HAVEN, FL 33884

TITLE VTD
NAME MERRITT, LEIGH S
STREET ADDRESS 3407 HIGHLAND ST
CITY-ST-ZIP BARTOW, FL

TITLE D
NAME DEWINKLER, JOANN S
STREET ADDRESS 2205 PICCADILLY CIRCUS
CITY-ST-ZIP NAPLES, FL 341123658

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

Jean Summers Stinson, Vice President

SIGNATURE: *Jean Summers Stinson*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 5, 2005 863-533-8107

Date

Daytime Phone #