

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 09, 2006 08:00 AM
Secretary of State

DOCUMENT # 367607

1. Entity Name
ENGLAND BROTHERS CONSTRUCTION CO., INC.



Principal Place of Business
**12255 - 75TH STREET, NORTH
LARGO, FL 33773-3031**

Mailing Address
**12255 - 75TH STREET, NORTH
LARGO, FL 33773-3031**

DO NOT WRITE IN THIS SPACE



01062006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1301706

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**ENGLAND, PHILLIP E
5357 76TH AVE. NORTH
PINELLAS PARK, FL 33781**

**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, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**000000380107
01/10/06-80049-010 150.00**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	V ENGLAND, JAMES 11686 GROVE STREET SEMINOLE, FL 0,
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P ENGLAND, TERRY M 309 6TH AVE INDIAN ROCKS BEACH, FL 33785
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S ENGLAND, PHILLIP E 5357 76TH AVE. NORTH PINELLAS PARK, FL 33781
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T ENGLAND, MARSHA K 309 6TH AVE. INDIAN ROCKS BEACH, FL 33785
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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/6/06