

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 05, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # 381099**

1. Entity Name  
**LOUDEN CONSTRUCTION CO., INC.**



Principal Place of Business  
**4306 S US HIGHWAY 1  
FT. PIERCE, FL 34982 US**

Mailing Address  
**4306 S US HIGHWAY 1  
FT. PIERCE, FL 34982 US**



04282006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-1358765**

Applied For
Not Applicable

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

**6. Name and Address of Current Registered Agent**

**BRUHN, ROBERT SCOTT  
4306 SOUTH US 1  
FT PIERCE, FL 34982**

**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

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	BRUHN, ROBERT SCOTT
STREET ADDRESS	4306 SO. U.S. HWY. 1
CITY-ST-ZIP	FT PIERCE, FL 34982

TITLE	V
NAME	BRUHN, MONIQUE L
STREET ADDRESS	4306 S US HWY 1
CITY-ST-ZIP	FORT PIERCE, FL 34982

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

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**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 line empowered.

**SIGNATURE:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5-1-06 772-465-2700