

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 468463

Entity Name: GAINESVILLE PAVING, INC.

FILED  
Apr 22, 2005  
Secretary of State

## Current Principal Place of Business:

5006 S.W. 41ST BLVD.  
GAINESVILLE, FL 32608

## New Principal Place of Business:

## Current Mailing Address:

5006 S.W. 41ST BLVD.  
GAINESVILLE, FL 32608

## New Mailing Address:

FEI Number: 59-1589022

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GREEN, PATRICIA A.  
5006 SW 41ST BLVD  
GAINESVILLE, FL 32608 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: GREEN, PATRICIA A.,  
Address: 5006 SW 41ST BLVD  
City-St-Zip: GAINESVILLE, FL 32608

Title: D ( ) Delete  
Name: GREEN, JUNE J.,  
Address: 5006 SW 41ST BLVD  
City-St-Zip: GAINESVILLE, FL 32608

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: PATRICIA A. GREEN

PD

04/22/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date