2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 FEB -3 AM 11:48

DOCUMENT # 502063

1. Entity Name
SCHEVELING CONSTRUCTION COMPANY

Principal Place of Business	Mailing Address
880 BAY ROAD MOUNT DORA, FL 32757 US	~~880 BAY ROAD~~ ~~MOUNT DORA, FL 32757 US~~

12292008 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
	8807 SW 31ST AVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State: GAINESVILLE, FL
Zip / Country	Zip: 32608 / Country: USA

4. FEI Number: 59-1661716 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SCHEVELING, MARTIN J ~~1611 NW 19TH CIRCLE~~ GAINESVILLE, FL ~~32605~~	Name: SCHEVELING, MARTIN J. Street Address (P.O. Box Number is Not Acceptable): 8807 SW 31ST AVE City: GAINESVILLE FL Zip Code: 32608

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: Martin Scheveling 1-2-09
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Amended AR is $61.25

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PSTD SCHEVELING, MARTIN J. ~~1611 NW 19TH CIRCLE~~ GAINESVILLE, FL ~~32605~~	☐ Delete	PSTD SCHEVELING, MARTIN J. 8807 SW 31ST AVE GAINESVILLE, FL 32608	☒ Change ☐ Addition
		☐ Delete	VD JUDE P. SCHEVELING 128 KINGSTON DR. ST. AUGUSTINE, FL 32084	☐ Change ☒ Addition
		☐ Delete	~~500140854045~~ 01/08/09--01032--024 **61.25 700142735057	☐ Change ☐ Addition
		☐ Delete	700142735057 02/03/09--01020--027 **88.75	☐ Change ☐ Addition
		☐ Delete	~~500142735146~~ 02/03/09--01020--028 **8.75	☐ Change ☐ Addition
		☐ Delete		☐ Change ☐ Addition

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: Martin Scheveling 1-2-09 828-507-2580
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

KS