2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Feb 11, 2005 08:00 AM Secretary of State DOCUMENT # 51 1042 1. Entity Name PETERSON CONSTRUCTION, INC. Principal Place of Business Mailing Address 2809 ROUND LAKE RD. P.O. BOX 1269 ZELLWOOD FL 32798 US ZELLWOOD FL 32798 2. Principal Place of Business 3. Mailing Address Suite, Apt #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State City & State Applied For 4. FEI Number 59-1689239 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PETERSON, ROGER A. Street Address (P.O. Box Number is Not Acceptable) 2809 ROUND LAKE RD ZELLWOOD FL 32798 Zip Code FL 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 9. Election Campaign Financing **\$5.00** May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. THLE PD DELE (iii) Change Delete ☐ Addition PETERSON, ROGER A. NAME STREET ADDRESS 2809 ROUND LAKE RD STREET APORESS U00000226047 ZELLWOOD FL 32798 CITY-ST-7IP CITY-ST-ZIP | 150 .. | Change <u> 02/11/05-20062</u> TITLE ☐ Delete itti E Addition NAME PETERSON, ROGER A., JR. NAME 2815 ROUND LAKE RD STREET ADDRESS STREET ADDRESS CITY ST-7(P ZELLWOOD FL 32798 CITY ST-ZIP TITLE ☐ Delete TATE F Change Addition NAME PETERSON, ARLENE J NAME STREET ADDRESS STREET ADDRESS 2869 ROUNDLAKE RD CITY-ST-ZIP ZELLWOOD FL 32798 CHY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STRFET ADDRESS CITY - ST - ZIP CITY-SI-ZIP Defete TITLE un Change Addition NAME NAMÉ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HILL Delete DDE☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)[f). 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

DayLeterson

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