

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 08, 2007 8:00 am
Secretary of State

03-08-2007 90023 008 ***150.00

DOCUMENT # 536646	
1. Entity Name YUSK CONSTRUCTION, INC.	

Principal Place of Business 1100 BAYSHORE DRIVE ENGLEWOOD FL 34223	Mailing Address 1100 BAYSHORE DRIVE ENGLEWOOD FL 34223
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E034 (10/06)

4. FEI Number 59-1746137		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent YUSK, RICHARD M. 1100 BAYSHORE DRIVE ENGLEWOOD FL 34223		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

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 transferring) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY ST-ZIP	PD YUSK, RICHARD M. 1100 BAYSHORE DRIVE ENGLEWOOD FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST-ZIP	ST YUSK, GEORGIA YUSK 1100 BAYSHORE DRIVE ENGLEWOOD FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST-ZIP	VP YUSK, RICHARD E 1654 MOHEGAN VENICE FL <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:  RICHARD M. YUSK 2-21-07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 941-697-0238