## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 673507** 

Name:

Address:

City-St-Zip:

GOODE, JOHN JR.

12558 SUN PALM DR

JACKSONVILLE, FL 32225

Entity Name: GBN CONSTRUCTION, INC

FILED Apr 16, 2009 Secretary of State

	ODIVO	ortorresoriort, irto.				
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
	NGTON EXI VILLE, FL 3					
Current Mailing Address:			New Maili	New Mailing Address:		
	NGTON EXI VILLE, FL 3					
FEI Number: 59-2012997 FEI Number Applied For ( )		FEI Number Not App	licable ( ) Certificate of Status Desired (X)			
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
6054-8 ÁR JACKSON	VILLE, FL 3		e purpose of changing i	ts registered office or registered agent, or both,		
	of Florida.	y submits this statement for the	ie purpose or changing i	ts registered office of registered agent, or both,		
SIGNATUR						
Election Car		onic Signature of Registered actions ( ).	Agent	D <b>a</b> te		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:		( ) Delete BRADEN J. BLUFF RD. N. LLE, FL 32211	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address:	VAN DEVEN 2655 SOUTH	PORTE VERDE BLVD	Title: Name: Address:	V (X) Change ( ) Addition VAN DEVENTER, KURT 2655 SOUTH PONTE VEDRA BLVD		
City-St-Zip:	V	RA BEACH, FL 32082	City-St-Zip: Title:	PONTE VEDRA BEACH, FL 32082  ( ) Change ( ) Addition		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

Name:

Address:

City-St-Zip:

SIGNATURE: BRADEN J. NEGAARD PRES 04/16/2009