

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 857234

FILED
Apr 03, 2009
Secretary of State

Entity Name: OGLESBY CONSTRUCTION, INC.

Current Principal Place of Business:

1600 TOLEDO ROAD
NORWALK, OH 44857

New Principal Place of Business:

Current Mailing Address:

1600 TOLEDO ROAD
NORWALK, OH 44857

New Mailing Address:

FEI Number: 34-1233573

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THEISEN, KEVIN P
600 HICKMAN CIRCLE
SANFORD, FL 32771 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: OGLESBY, MASON P.,
Address: 1041 SOUTH NORWALK RD.
City-St-Zip: NORWALK, OH 44857

Title: STD () Delete
Name: MCQUERREY, SHIRLEEN M
Address: 8 JAMIE WAY
City-St-Zip: NORWALK, OH 44857

Title: VD () Delete
Name: THEISEN, KEVIN P
Address: 1688 COTTONWOOD CREEK PLACE
City-St-Zip: LAKE MARY, FL 32746

Title: VD () Delete
Name: HUG, STEVEN
Address: 1 JENNIFER WAY
City-St-Zip: NORWALK, OH 44857

Title: VD () Delete
Name: REICHERT, GERALD,
Address: 746 MALLARD POINTE
City-St-Zip: NORWALK, OH 44857

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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.

SIGNATURE: SHIRLEEN M. MCQUERREY

STD

04/03/2009

Electronic Signature of Signing Officer or Director

Date