

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000006231

FILED  
Jul 05, 2007  
Secretary of State

Entity Name: CONSTRUCTION CONTROL CORPORATION

**Current Principal Place of Business:**

1106 WHITCOMB AVE  
ROYAL OAK, MI 48073

**New Principal Place of Business:**

**Current Mailing Address:**

1106 WHITCOMB AVE  
ROYAL OAK, MI 48073

**New Mailing Address:**

FEI Number: 38-3335624

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FIELD, GILBERT E  
1070 LAUREL ROAD EAST, UNIT 518  
NOKOMIS, FL 34275 US

**Name and Address of New Registered Agent:**

FIELD, GILBERT E  
1070 LAUREL ROAD EAST, UNIT 273  
NOKOMIS, FL 34275 US

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: \_\_\_\_\_

07/05/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BROWN, SHAWN M  
Address: 1106 WHITCOMB  
City-St-Zip: ROYAL OAK, MI 48073

Title: ST ( ) Delete  
Name: FIELD, DONNA M  
Address: 1070 LAUREL ROAD EAST, UNIT 518  
City-St-Zip: NOKOMIS, FL 34275

Title: C ( ) Delete  
Name: FIELD, GILBERT E  
Address: 1070 LAUREL ROAD EAST, UNIT 518  
City-St-Zip: NOKOMIS, FL 34275

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: ST (X) Change ( ) Addition  
Name: FIELD, DONNA M  
Address: 1070 LAUREL ROAD EAST, UNIT 273  
City-St-Zip: NOKOMIS, FL 34275

Title: C (X) Change ( ) Addition  
Name: FIELD, GILBERT E  
Address: 1070 LAUREL ROAD EAST, UNIT 273  
City-St-Zip: NOKOMIS, FL 34275

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: SHAWN BROWN

PRES

07/05/2007

Electronic Signature of Signing Officer or Director

Date