

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006776

FILED
Apr 08, 2008
Secretary of State

Entity Name: WINDLE CONSTRUCTION COMPANY, INC.

Current Principal Place of Business:

23727 HWY 17 S
CARROLLTON, AL 35447

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 319
CARROLLTON, AL 35447

New Mailing Address:

FEI Number: 63-0578644 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BRYANT-SCROGGINS, JULIE W
102 DURHAM PL.
LONGWOOD, FL 32779 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: CEO () Delete
Name: WINDLE, BOBBY C
Address: P.O. BOX 319
City-St-Zip: CARROLLTON, AL 35447

Title: DP () Delete
Name: WINDLE, BOBBY C
Address: P.O. BOX 319
City-St-Zip: CARROLLTON, AL 35447

Title: DST () Delete
Name: WILSON, NORMA
Address: 22380 HIGHWAY 11
City-St-Zip: EUTAW, AL 35462

Title: DV () Delete
Name: WINDLE, BONNIE
Address: 265 CLEMENTS ST.
City-St-Zip: CARROLLTON, AL 35447

Title: VP () Delete
Name: BRYANT-SCROGGINS, JULIE W
Address: 102 DURHAM PLACE
City-St-Zip: LONGWOOD, FL 32779

Title: VP () Delete
Name: BRYANT, RANDALL W
Address: 102 DURHAM PLACE
City-St-Zip: LONGWOOD, FL 32779

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
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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: BONNIE WINDLE

DVP

04/08/2008

Electronic Signature of Signing Officer or Director

_____ Date