

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2007 08:00 A
Secretary of State

DOCUMENT # F06000004528

1. Entity Name
BEERS & WILSON CONSTRUCTION, INC



Principal Place of Business
4019 HIGHWAY 40 EAST
STE. C
ST. MARYS, GA 31558

Mailing Address
4019 HIGHWAY 40 EAST
STE. C
ST. MARYS, GA 31558



02192007 No Chg-P CR2E034 (11/05)

4. FEI Number
75-3149450

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HOMAYER, WILLIAM
3009 BURKIT LANE
JACKSONVILLE, FL 32226

**DO NOT WRITE
IN THIS SPACE**

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 reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
WILSON, STEVEN
109 ROYAL ACRES CIRCLE
KINGSLAND, GA 31548

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
WILSON, BRYAN
239B LAKEMONT DR. WEST
KINGSLAND, GA 31548

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ST
WILSON, JUDY
60 N. RIVER OAKS CT.
ST. MARYS, GA 31548

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000747226
05/17/07-80017-008 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Judy Wilson* *Judy Wilson*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/07

DATE

912-322-1508

Daytime Phone #