



**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 26, 2007 08:00 AM
Secretary of State

DOCUMENT # F27900 1. Entity Name COFFMAN CONSTRUCTION, INC.			
Principal Place of Business 1397 22ND STREET N. ST. PETERSBURG, FL 33713		Mailing Address 1397 22ND STREET N. ST. PETERSBURG, FL 33713	
DO NOT WRITE IN THIS SPACE			
DO NOT WRITE IN THIS SPACE		4. FEI Number 59-2094564	
		Applied For Not Applicable	
6. Name and Address of Current Registered Agent GAYLE COFFMAN 1397 22ND STREET N. ST. PETERSBURG, FL 33713		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
		000000679925 04/03/07-80058-004 150.00	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DT COFFMAN, GAYLE 341-6TH AVE. N. TIERRA VERDE, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DPS COFFMAN, W DONALD, JR 341-6TH AVE. N. TIERRA VERDE, FL	
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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  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		W. DONALD COFFMAN Date 3/13/07 Daytime Phone # 727-327-3631	