## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F66445

Address:

City-St-Zip:

Entity Name: NFC CONSTRUCTION & RENTAL CO.

FILED Jan 27, 2009 Secretary of State

Current P	rincipal Plac	e of Business:	New Principal Place	New Principal Place of Business:	
	CKTON STREE IVILLE, FL 32				
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
526 STOCKTON STREET JACKSONVILLE, FL 32204			526 STOCKTON STREET JACKSONVILLE, FL 32204		
FEI Number	: 59-2155230	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
ONE INDE	OK, H. LEON EPENDENT DI 01 IVILLE, FL 32				
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,	
SIGNATU					
Election Ca		nic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P ( GAY, W W 524 STOCKTO JACKSONVILL		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VS ( PAINTER, ROO 526 STOCKTO JACKSONVILL	N STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T ( LEE, KATHRYI 524 STOCKTO JACKSONVILL	N STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D ( HOLBROOK, F	) Delete f. LEON	Title: Name:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: ROGER PAINTER VS 01/27/2009

ONE INDEPENDENT DR., SUITE 2301

JACKSONVILLE, FL 32202