

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 21, 2006 8:00 am
Secretary of State

07-21-2006 90025 031 ***150.00

DOCUMENT # F98000000561					
1. Entity Name AMSDELL CONSTRUCTION, INC.					
Principal Place of Business THE PARKVIE BLDG 6745 ENGLE RD, STE 300 MIDDLEBURG HEIGHTS, OH 44130			Mailing Address THE PARKVIE BLDG 6745 ENGLE RD, STE 300 MIDDLEBURG HEIGHTS, OH 44130		
2. Principal Place of Business 6755 ENGLE ROAD		3. Mailing Address 6755 ENGLE ROAD			
Suite, Apt. #, etc. STE A		Suite, Apt. #, etc. STE A			
City & State MIDDLEBURG HEIGHTS, OH		City & State MIDDLEBURG HEIGHTS, OH			
Zip 44130	Country USA	Zip 44130	Country USA		
4. FEI Number 34-1317284				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____		
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 _____ <small>Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE PTD	NAME AMSDELL, BARRY L	<input type="checkbox"/> Delete	TITLE 	NAME 	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 6745 ENGLE RD, STE 300	CITY-ST-ZIP MIDDLEBURG HEIGHTS, OH		STREET ADDRESS 	CITY-ST-ZIP 6755 ENGLE RD, STE A	
TITLE VSD	NAME AMSDELL, ROBERT J	<input type="checkbox"/> Delete	TITLE 	NAME 	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 6745 ENGLE RD, STE 300	CITY-ST-ZIP MIDDLEBURG HEIGHTS, OH		STREET ADDRESS 	CITY-ST-ZIP 6755 ENGLE RD, STE A	
TITLE VP	NAME AMSDELL, TODD C	<input type="checkbox"/> Delete	TITLE 	NAME 	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 6745 ENGLE RD STE 300	CITY-ST-ZIP MIDDLEBURG HEIGHTS, OH 44130		STREET ADDRESS 	CITY-ST-ZIP 6755 ENGLE RD, STE A	
TITLE AS	NAME BARTEL, CHRISTIAN J	<input type="checkbox"/> Delete	TITLE 	NAME 	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 6745 ENGLE RD STE 300	CITY-ST-ZIP MIDDLEBURG HEIGHTS, OH 44130		STREET ADDRESS 	CITY-ST-ZIP 6755 ENGLE RD, STE A	
TITLE T	NAME AMSDELL, BARRY L	<input type="checkbox"/> Delete	TITLE 	NAME 	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 6745 ENGLE RD STE 300	CITY-ST-ZIP MIDDLEBURG HEIGHTS, OH 44130		STREET ADDRESS 	CITY-ST-ZIP 6755 ENGLE RD, STE A	
TITLE 	NAME 	<input type="checkbox"/> Delete	TITLE 	NAME 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 	CITY-ST-ZIP 		STREET ADDRESS 	CITY-ST-ZIP 	
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: <i>Barry L. Amstell</i>			July 14, 2006 440.891-4100		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		