## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F99000005837

Title:

Name:

Address:

City-St-Zip:

FILED Jun 30, 2005 Secretary of State

Entity Nam	ie: DAVID CHI	RISTA CONSTRUCTION, INC				
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
119 VICTOR VICTOR, N	R HEIGHTS PA Y 14564	RKWAY				
Current Mailing Address:			New Mailing Address:			
119 VICTOI VICTOR, N	R HEIGHTS PA Y 14564	RKWAY				
FEI Number:	16-1200324	FEI Number Applied For ( )	FEI Number Not Appli	clicable ( ) Certificate of Status Desired (X)		
Name and	Address of Cu	rrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
526 EAST F	G & SEARCH S PARK AVENUE SEE, FL 32301					
The above in the State		bmits this statement for the pu	rpose of changing it	its registered office or registered agent, or bo	th,	
SIGNATUR						
		Signature of Registered Ager		Date		
Election Cam	paign Financing <sup>-</sup>	2)(b), F.S., the corporation did not Frust Fund Contribution ( ).	-			
OFFICERS	AND DIRECT	ORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIRECT	ORS:	
Title: Name: Address: City-St-Zip:	P () C CHRISTA, DAVID 119 VICTOR HEIG VICTOR, NY 145		Title: Name: Address: City-St-Zip:	C (X) Change ( ) Addition CHRISTA, DAVID 119 VICTOR HEIGHTS PARKWAY VICTOR, NY 14564		
Title: Name: Address: City-St-Zip:	S () C CHRISTA, FRANK 119 VICTOR HEIG VICTOR, NY 145	GHTS PARKWAY	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	V () DEHMLER, MICH 119 VICTOR HEIG VICTOR, NY 145	GHTS PARKWAY	Title: Name: Address: City-St-Zip:	P (X) Change ( ) Addition DEHMLER, MICHAEL 119 VICTOR HEIGHTS PARKWAY VICTOR, NY 14564		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: FRANK CHRISTA S 06/30/2005

( ) Delete

119 VICTOR HEIGHTS PARKWAY

CASEY, JOHN

VICTOR, NY 14564

() Change () Addition