

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2006 08:00 AM
Secretary of State

DOCUMENT # G43630

1. Entity Name

HAROLD PRATT PAVING AND SEALING, INC.



Principal Place of Business

2242 BRUNER LANE, SE
FT. MYERS, FL 33912

Mailing Address

2242 BRUNER LANE, SE
FT. MYERS, FL 33912



04272006

No Chg-P

CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2344688

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

8. Name and Address of Current Registered Agent

PRATT, HAROLD W.
2242 BRUNER LANE, SE
FT. MYERS, FL 33912

**DO NOT WRITE
IN THIS SPACE**

6. 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, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME PRATT, HAROLD W.
STREET ADDRESS 2242 BRUNER LANE, SE
CITY-ST-ZIP FT. MYERS, FL

TITLE V
NAME PRATT, HAROLD H.
STREET ADDRESS 2242 BRUNER LANE SE
CITY-ST-ZIP FORT MYERS, FL 33912

TITLE ST
NAME PRATT, BERDENETH
STREET ADDRESS 2242 BRUNER LANE SE
CITY-ST-ZIP FORT MYERS, FL 33912

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000560892
05/18/06-80056-021 150.00

**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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Harold Pratt / PRES

4/28/06

239-283-9023

Date

Daytime Phone #