## **2007 FOR PROFIT CORPORATION**

## May 03, 2007 8:00 am Secretary of State ANNUAL REPORT

## DOCUMENT # G43630 HAROLD PRATT PAVING AND SEALING, INC.



**FILED** 

05-03-2007 90032 046 \*\*\*150.00 Principal Place of Business Mailing Address 2242 BRUNER LANE, SE 2242 BRUNER LANE, SE FT. MYERS, FL 33912 FT. MYERS, FL 33912 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04302007 CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 59-2344688 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PRATT, HAROLD W. Street Address (P.O. Box Number is Not Acceptable) 2242 BRUNER LANE, SE FT. MYERS, FL 33912 City 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. PD TITLE ☐ Delete TITLE Change ☐ Addition PRATT, HAROLD W. NAME 2242 BRUNER LANE, SE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT. MYERS, FL CITY-ST-ZIP ☐ Delete ☐ Change ■ Addition PRATT, HAROLD H. NAME NAME STREET ADDRESS 2242 BRUNER LANE SE STREET ADDRESS CITY-ST-ZIP FORT MYERS, FL 33912 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ■ Addition PRATT, BERDENETH NAME NAMĘ STREET ADDRESS 2242 BRUNER LANE SE STREET ADDRESS FORT MYERS, FL 33912 CITY-ST-ZIP CITY-SI-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF TITLE ☐ Defete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-\$1-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP 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

A Harold W Pratt

April 30, 2007

239-489-0111