

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 08, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # G80043**

1. Entity Name  
**DANA SITE DEVELOPMENT & PAVING INC.**



Principal Place of Business  
**3408 17TH STR E  
PALMETTO, FL 34221 US**

Mailing Address  
**3408 17TH STR E  
PALMETTO, FL 34221 US**



01042007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-2375894**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**LOWE, WILLIAM E  
1111 3 AVE W  
BRADENTON, FL 34205**

**DO NOT WRITE  
IN THIS SPACE**

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

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, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	VDT
NAME	NELSON, REX ALLEN
STREET ADDRESS	15610 COUNTY RD 675
CITY-ST-ZIP	PARRISH, FL 34219
TITLE	VDS
NAME	CRONIN, DANA A.
STREET ADDRESS	15618 COUNTY RD 675
CITY-ST-ZIP	PARRISH, FL 34219
TITLE	PD
NAME	NELSON, THERESA ANN
STREET ADDRESS	15610 COUNTY RD 675
CITY-ST-ZIP	PARRISH, FL 34219
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000577374  
01/08/07-80013-019 150.00

**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

Date

Daytime Phone #

*Theresa A. Nelson* **Theresa A. Nelson** 1/4/07

941-722-4413  
OFFICE