2005 FOR PROFIT CORPORATION ANNUAL REPORT

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Apr 22, 2005 8:00 am
Secretary of State
04-22-2005 90288 014 ***150.00

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04202005 Chg-P CR2E034 (10/03)

DOCUMENT # G84454

1. Entity Name
DOUG MYERS, CONSTRUCTION, INC.

Principal Place of Business	Mailing Address
~~6106 91ST ST EAST~~ ~~P.O. BOX 20086~~ ~~BRADENTON, FL 34203~~	~~6106 91ST ST EAST~~ ~~P.O. BOX 20086~~ ~~BRADENTON, FL 34203~~

2. Principal Place of Business		3. Mailing Address	
9708 64th AVE. E.			
Suite, Apt. #, etc. P.O. Box 20086		Suite, Apt. #, etc.	
City & State Bradenton, Fl		City & State	
Zip 34204	Country Manatee	Zip	Country

4. FEI Number 59-2371813 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MYERS, DOUG ~~6106 91ST ST. EAST~~ 9708 64th AVE. E. BRADENTON, FL 34203	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 ____________________
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, 2005 Fee will be $550.00

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

10.	OFFICERS AND DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS MYERS, DOUGLAS ~~6106 91ST ST. EAST~~ 9708 64th AVE E BRADENTON, FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MYERS, DOUGLAS 6106 91ST ST. EAST BRADENTON, FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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: Doug Myers 4-20-05 941-737-3255
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #