2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G85333

Name:

Address:

City-St-Zip:

HERTZ, SCOTT

403 SW 49 LN

CAPE CORAL, FL 33914

Entity Name: POWELL CONSTRUCTION COMPANY

FILED Mar 06, 2009 Secretary of State

y		301101110011011000111171111				
Current Principal Place of Business:				New Principal Place of Business:		
804 NICHO SUITE 2	DLAS PKWY E		1708 BE 202	EACH PARKWAY		
CAPE COR	RAL, FL 33990	US	CAPE C	ORAL, FL 33904	US	
Current Mailing Address:				New Mailing Address:		
804 NICHOLAS PKWY E				1708 BEACH PARKWAY 202		
SUITE 2 CAPE COF	RAL, FL 33990	US		ORAL, FL 33904	US	
FEI Number:	59-2382481	FEI Number Applied For ()	FEI Number Not A	pplicable ()	Certificate of Status Desire	;d ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
HERTZ, SCOTT 804 NICHOLAS PKWY E, STE. 2 CAPE CORAL, FL 33990 US				HERTZ, SCOTT 403 SE 49TH LANE CAPE CORAL, FL 33914 US		
	named entity su of Florida.	ubmits this statement for the p	urpose of changin	g its registered of	fice or registered agent,	or both,
SIGNATURE:				03/06/2009		
	Electronic	Signature of Registered Age	nt		Date	
Election Car	npaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	VD ()[POWELL, BILL, 1708 BEACH PAI CAPE CORAL, F		Title: Name: Address: City-St-Zi _l	``,	Change () Addition	
Title: Name: Address: City-St-Zip:	ST ()[POWELL, MARJ 1708 BEACH PA CAPE CORAL, F	RKWAY #202	Title: Name: Address: City-St-Zi _l	, ,	Change () Addition	
Title [.]	Р ()Г	Delete	Title:	()	Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

Name:

Address:

City-St-Zip:

SIGNATURE: MARJORIE POWELL ST 03/06/2009