
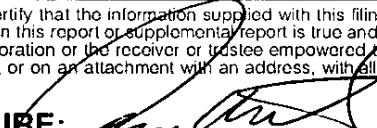


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jan 26, 2007 8:00 am**  
**Secretary of State**

01-26-2007 90043 001 \*\*\*150.00

<b>DOCUMENT # H17163</b> 1. Entity Name <b>SUTTER BUILDING CONTRACTORS, INC.</b>					
Principal Place of Business <b>5616 GULF DR NEW PT. RICHEY FL 34652 US</b>			Mailing Address <b>5616 GULF DR NEW PT. RICHEY FL 34652 US</b>		
2. Principal Place of Business - No P.O. Box # <b>6702 Osteen Road</b>		3. Mailing Address <b>6702 Osteen Road</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State <b>New Port Richey FL</b>		City & State <b>New Port Richey FL</b>		4. FEI Number <b>59-2439909</b>	
Zip <b>34653</b>		Country <b>US</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>			
<b>6. Name and Address of Current Registered Agent</b>  <b>SUTTER, SCOTT H 5616 GULF DR NEW PORT RICHEY FL 34652</b>			<b>7. Name and Address of New Registered Agent</b> Name <b>Sutter, Scott H.</b> Street Address (P.O. Box Number is Not Acceptable) <b>6702 Osteen Road</b> City <b>New Port Richey FL</b> Zip Code <b>34653</b>		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee Will Be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY ST ZIP	PST SUTTER, SCOTT H. 5616 GULF DR NEW PORT RICHEY FL 34652		TITLE NAME STREET ADDRESS CITY ST ZIP	PST Sutter, Scott H. 6702 Osteen Road New Port Richey, FL 34653	
<input type="checkbox"/> Delete			<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.					
<b>SIGNATURE:</b>  <b>Scott H. Sutter</b> 1/23/07 (727) 845-7310					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					