

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H40072

FILED
Apr 26, 2005
Secretary of State

Entity Name: AVON CONSTRUCTION, INC.

Current Principal Place of Business:

1401 W BLISS ST
AVON PARK, FL 33825

New Principal Place of Business:

Current Mailing Address:

1401 W BLISS ST
AVON PARK, FL 33825

New Mailing Address:

FEI Number: 59-2494434 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCLELLAN, JOHN F
1401 W BLISS ST
AVON PARK, FL 33825 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MCCLELLAN, JOHN F
Address: 1401 W BLISS ST
City-St-Zip: AVON PARK, FL

Title: DT () Delete
Name: MCCLELLAN, SHERYL A
Address: 1401 W. BLISS STREET
City-St-Zip: AVON PARK, FL

Title: DVP () Delete
Name: ROSH, MCCLELLAN R
Address: 1401 W BLISS ST
City-St-Zip: AVON PARK, FL 33825

Title: S () Delete
Name: EWING, JUDY
Address: RT 2 BOX 174C NA
City-St-Zip: ZOLFO SPRINGS, FL

Title: D () Delete
Name: MCCLELLAN, ZEAH
Address: 1401 W BLISS ST
City-St-Zip: AVON PARK, FL

Title: DVP () Delete
Name: MCCLELLAN, BRASS C
Address: 1401 W. BLISS ST
City-St-Zip: AVON PARK, FL 33825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: EWING, JUDY
Address: 1217 PARNELL RD
City-St-Zip: ZOLFO SPRINGS, FL

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: JOHN F. MCCLELLAN

DP

04/26/2005

Electronic Signature of Signing Officer or Director

Date