## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jan 25, 2007 8:00 am Secretary of State

DOCUMENT # H71725  1. Entity Name TINCHER CONCRETE CONSTRUCTION, INC.						90054 033 ***15	0.00	
Principal Place of Business Mailing Address					502			
16900 GATOR RD P.O. BOX 1668 FT. MYERS, FL 33912 US FORT MYERS, FL 33902			US	2000		il sien eien eien eien eien eien	11 <b>891</b> 11 <b>178</b> 1	
Principal Place of Business - No P.O. Box # 3. Mailing Address 16900 GATOR			e Ro.					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01082007	Chg-P	CR2E034 (12/06)		
City & State		FT. MYERS FL		4. FEI Numbe 59-2570			oplied For ot Applicable	
Zip	Country	33912	Country <b>いら</b>	5. Certificate	of Status Desired	S8.75 Add Fee Require		
	6. Name and Address of Current	Registered Agent	Name	7. Name and	Address of New I	Registered Agent		
KAYUSA,	MICHAEL F	Name						
1922 VICTORIA AVENUE SUITE A			Street Addres	Street Address (P.O. Box Number is Not Acceptable)				
FT. MYERS, FL 33912								
			City			FL Zip Cod	e	
<ul> <li>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.</li> <li>SIGNATURE  Signature, typed or printed name of registered agent and bits if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE</li> </ul>								
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution.								
10.	OFFICERS AND		11.	ADDITIONS/	CHANGES TO OFF	FICERS AND DIRECTOR		
NAME STREET ADDRESS CITY-ST-ZIP	PD TINCHER, JAMES D. 1568 HILL AVE FORT MYERS, FL 33901	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE	VD	☐ Delete	TITLE			☐ Change	☐ Addition	
NAME STREET ADDRESS	TINCHER, TERRY A. 2260 FIRST ST. #206		NAME STREET ADDRESS					
CITY-ST-ZIP	FORT MYERS, FL 33901		CITY-ST-ZIP					
NAME STREET ADDRESS CITY-ST-ZIP	DST TINCHER, RALPH A 18991 SERENOA COURT ALVA, FL 33920	□ Delete	TITLE NAME STREET ADDRESS CITY-SI-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS			☐ Change	Addition	
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TITLE		☐ Delete	TITLE			☐ Change	Addition	
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STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP					

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 attackment with an address, with all other like empowered.

SIGNATURE: JAMES D. TINCHER 1-23-07 239-267-7766
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytere Proce