


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 22, 2007 08:00 AM
Secretary of State

DOCUMENT # J46789 1. Entity Name RONNIE PLATT CONSTRUCTION, INC.	
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Principal Place of Business 1946 CANAL RD. LAKE WALES, FL 33853	Mailing Address 1946 CANAL RD. LAKE WALES, FL 33853
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DO NOT WRITE IN THIS SPACE



06142007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2816525	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HUTCHINSON, JONNIE M., ESQ. 150 E. HAINES BLVD. LAKE ALFRED, FL 33850

DO NOT WRITE IN THIS SPACE

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 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT PLATT, RONNIE G. 1946 CANAL RD. LAKE WALES, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PLATT, GLENDA D. 1946 CANAL RD. LAKE WALES, FL
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08/22/07-80003-016 158.75

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 attachment with an address, with all other like empowered.

SIGNATURE: Ronald Platt Ronald Platt Pm 8/14/07 863 412 4812
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #