


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 09, 2007 8:00 am
Secretary of State

05-09-2007 90104 038 ***150.00

DOCUMENT # K08595

1. Entity Name
 BLUEGRASS CONSTRUCTION, INC.



Principal Place of Business 10707 CARROLL LAKE DR. TAMPA, FL 33618 4015 US <i>10414 N. Florida Avenue Tampa FL 33612</i>	Mailing Address 10707 CARROLL LAKE DR. TAMPA, FL 33618 4015 US <i>10414 N. Florida Ave Tampa, FL 33612</i>
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40109313



04182007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2866985	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NETZLER, DAVID E.
 10707 CARROLL LAKE DR
 TAMPA, FL 33618 4015
*7 Lake Hollingsworth
 Labeland Florida 33803*
David

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: *David E. Netzler* President *4-26-07*
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD NETZLER, DAVID E. 10707 CARROLL LAKE DR TAMPA, FL 33618 <i>7 Lake Hollingsworth Labeland FL 33803</i>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>D</i> Robert L. Powell, Jr. 10883 117th Street N. Seminole, FL 33778
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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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: *David E. Netzler* President *4-26-07* *813-267-3211*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #