


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jul 19, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L40132</b>	
1. Entity Name WALBRIDGE CONTRACTING, INC.	
	
Principal Place of Business 9942 CURRIE DAVIS DRIVE SUITE H TAMPA, FL 33619	Mailing Address 9942 CURRIE DAVIS DRIVE SUITE H TAMPA, FL 33619



07072004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-0160996	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  CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324	<b>DO NOT WRITE IN THIS SPACE</b>
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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 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$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.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D RAKOLTA, JOHN R 613 ABBOTT ST DETROIT, MI
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V MARSHALL, RICHARD 9942 CURRIE DAVIS DRIVE TAMPA, FL 33619
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD HAUSMANN, RONALD L P.E. 613 ABBOTT STREET DETROIT, MI 48226
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT DEANGELIS, VINCE 613 ABBOTT ST DETROIT, MI 48226
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD HALLER, RICHARD 613 ABBOTT ST DETROIT, MI 48226
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD HALLER, MICHAEL 613 ABBOTT ST DETROIT, MI 48226

100000166851  
07/19/04-80001-006 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 affidavit with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Ronald L. Hausmann*  
RONALD L. HAUSMANN

Date

7-7-04

Daytime Phone #

248-258-9434