

2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# M76325

**FILED
May 09, 2012
Secretary of State**

Entity Name: CENTRAL STATE CONSTRUCTION, INC.

Current Principal Place of Business:

4951 N.E. 189 TERRACE
WILLISTON, FL 32696

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 804
WILLISTON, FL 32696

New Mailing Address:

FEI Number: 59-2906547 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GRIFFIS, EDWIN E
4951 N.E. 189 TERRACE
WILLISTON, FL 32696 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

OFFICERS AND DIRECTORS:

Title: P
Name: GRIFFIS, EDWIN E
Address: P.O. BOX 804
City-St-Zip: WILLISTON, FL 32696

Title: VC
Name: FARRSCHINDEL/GRIFFIS, YVONNE M
Address: 439 S.E 54TH COURT
City-St-Zip: OCALA, FL 34480

Title: SEC.
Name: GRIFFIS, EDWIN E
Address: P.O BOX 804
City-St-Zip: WILLISTON, FL 32696

Title: T
Name: GRIFFIS, EDWIN E
Address: P.O BOX 804
City-St-Zip: WILLISTON, FL 32696

I hereby 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 all other like empowered.

SIGNATURE: EDWIN E. GRIFFIS

P

05/09/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date