

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M78956

FILED
Jan 30, 2009
Secretary of State

Entity Name: AAGAARD-MCNARY CONSTRUCTION, INC.

Current Principal Place of Business:

204 O'BRIEN RD
CASSELBERRY, FL 32730

New Principal Place of Business:

Current Mailing Address:

PO BOX 608003
ORLANDO, FL 32860

New Mailing Address:

204 O'BRIEN RD
CASSELBERRY, FL 32730

FEI Number: 59-2888588

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MCNARY, WILLIAM R.
811 ARLINGTON
ALTAMONTE, FL 32701 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MCNARY, WILLIAM R.,
Address: 811 ARLINGTON
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: VD () Delete
Name: AAGAARD, DAVID E.
Address: 529 RESERVE DR
City-St-Zip: TAVARES, FL 32778

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: WILLIAM R. MCNARY

PD

01/30/2009

Electronic Signature of Signing Officer or Director

Date