

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M90725

FILED
Feb 27, 2009
Secretary of State

Entity Name: PERTREE CONSTRUCTORS, INC.

Current Principal Place of Business:

1800 33RD STREET, SUITE 200
ORLANDO, FL 32839 US

New Principal Place of Business:

Current Mailing Address:

1800 33RD STREET, SUITE 200
ORLANDO, FL 32839 US

New Mailing Address:

FEI Number: 59-2903920

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERTREE, J. MICHAEL
6409 LAKE BURDEN VIEW DR
WINDERMERE, FL 34786 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: P () Delete
Name: WHITE, JOHN T
Address: 1515 WAYNESBORO CT
City-St-Zip: MARIETTA, GA 30062

Title: C () Delete
Name: PERTREE, J MICHAEL
Address: 6409 LAKE BURDEN VIEW DR
City-St-Zip: WINDERMERE, FL 34786

Title: VP () Delete
Name: TANNER, PHILIP G
Address: 1806 PALMER AVENUE
City-St-Zip: WINTER PARK, FL 32792

Title: VP () Delete
Name: VANHOUTEN, GARY L
Address: 1515 COLUSO DRIVE
City-St-Zip: WINTER GARDEN, FL 34787

Title: VP () Delete
Name: LANDON, BRADLEY D
Address: 2200 RIDGEWIND WAY
City-St-Zip: WINDERMERE, FL 34786

Title: ST () Delete
Name: MEYERS, BRENDA
Address: 1951 POMERANIAN
City-St-Zip: APOKA, FL 327121

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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Address:
City-St-Zip:

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: JOHN WHITE

P

02/27/2009

Electronic Signature of Signing Officer or Director

Date