

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000006322

FILED
Apr 23, 2009
Secretary of State

Entity Name: GRAHAM CONSTRUCTION, INC.

Current Principal Place of Business:

34510 MISSION BELL LANE
DADE CITY, FL 33525

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 296
DADE CITY, FL 33526

New Mailing Address:

FEI Number: 31-1687793

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAHAM, PHILLIP V
34510 MISSION BELL LANE
DADE CITY, FL 33525 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: DP () Delete
Name: GRAHAM, PHILLIP V
Address: 34510 MISSION BELL LANE
City-St-Zip: DADE CITY, FL 33525

Title: DVP () Delete
Name: GRAHAM, K SCOTT
Address: 17452 HWY 301
City-St-Zip: DADE CITY, FL 33523

Title: T () Delete
Name: GRAHAM, KENNETH
Address: 5372 CYRIL DR
City-St-Zip: DADE CITY, FL 33523

Title: S () Delete
Name: JOHNSON, NANCY
Address: 16307 KALLI WAY
City-St-Zip: DADE CITY, FL 33523

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:

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: PHILLIP GRAHAM

P

04/23/2009

Electronic Signature of Signing Officer or Director

Date