## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000016021

Entity Name: DEANS CONSTRUCTION SERVICES, INC.

FILED Apr 04, 2007 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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2215 KNIGHTS TRAIL ROAD 124 MORSE COURT

NOKOMIS, FL 34274 NORTH VENICE, FL 34275

**Current Mailing Address: New Mailing Address:** 

PO BOX 698 124 MORSE COURT

NOKOMIS, FL 34274 NORTH VENICE, FL 34275

FEI Number: 65-0983910 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

DEANS, SONDRA L DEANS, SONDRA L 2215 KNIGHTS TRAIL RD 124 MORSE COURT US

NOKOMIS, FL 34274 NORTH VENICE, FL 34275

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: SONDRA L. DEANS 04/04/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

DEANS, SONDRA DEANS, SONDRA Name: Name: 2215 KNIGHTS TRAIL RD PO BOX 698 124 MORSE COURT Address: Address:

City-St-Zip: NOKOMIS, FL 34274 City-St-Zip: NORTH VENICE, FL 34275

Title: Title: (X) Change ( ) Addition () Delete

Name: DEANS, JAMES T Name: DEANS, JAMES T 2215 KNIGHTS TRAIL RD PO BOX 698 124 MORSE COURT Address: Address: NOKOMIS, FL 34274 NORTH VENICE, FL 34275 City-St-Zip: City-St-Zip:

Title: Title: () Delete (X) Change ( ) Addition DOYLE, ROBERT M Name: DOYLE, ROBERT M Name:

2215 KNIGHTS TRAIL RD PO BOX 698 124 MORSE COURT Address: Address: City-St-Zip: NOKOMIS, FL 34274 City-St-Zip: NORTH VENICE, FL 34275

I hereby certify that the information supplied with this filing does not qualify for the 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: SONDRA L. DEANS **PVD** 04/04/2007