

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 28, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # P00000051787**

1. Entity Name  
**ALAN BARON CONSTRUCTION, INC.**



Principal Place of Business  
**13550 OAK KNOLL ROAD  
CLERMONT, FL 34711**

Mailing Address  
**13550 OAK KNOLL ROAD  
CLERMONT, FL 34711**



02112007 No Chg-P CR2E034 (11/05)

4. FEI Number  
**59-3648277**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

**BARON, ALAN  
13550 OAK KNOLL ROAD  
CLERMONT, FL 34711**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Alan Baron*  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

2-26-07

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	D
NAME	BARON, ALAN
STREET ADDRESS	13550 OAK KNOLL ROAD
CITY-ST-ZIP	CLERMONT, FL 34711
TITLE	VP
NAME	BARON, GREGORY
STREET ADDRESS	10645 PKWY DR
CITY-ST-ZIP	CLERMONT, FL 34711
TITLE	S
NAME	BARON, GARY
STREET ADDRESS	10329 CAYA COSTA CT
CITY-ST-ZIP	CLERMONT, FL 34711
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000650709  
03/08/07-80024-015 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

*Alan Baron*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-26-07