

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000064452

Entity Name: FADEN BUILDERS, INC.

**FILED**  
**Jan 26, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

736 S ROSSITER ST  
MT DORA, FL 32757

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 242  
TANGERINE, FL 32777

**New Mailing Address:**

FEI Number: 59-3659554

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FADEN, TODD M  
7072 LAKE OLA DR  
MT DORA, FL 32757 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: FADEN, TODD  
Address: 7072 LAKE OLA DR.  
City-St-Zip: MOUNT DORA, FL 32757

Title: TSVP  
Name: FADEN, LAURA  
Address: 7072 LAKE OLA DR.  
City-St-Zip: MOUNT DORA, FL 32757

I hereby 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 all other like empowered.

SIGNATURE: TODD M. FADEN

PRES

01/26/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date