2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000065829

Address:

City-St-Zip:

Entity Name: PICKFORD CONSTRUCTION & ASSOCIATES INC

FILED Jan 03, 2005 Secretary of State

Current Principal Place of Business:			New Prince	New Principal Place of Business:		
5133-4 SO JACKSON	OUTEL DR. VILLE, FL 32	208				
Current Mailing Address:			New Maili	New Mailing Address:		
5133-4 SO JACKSON	OUTEL DR. VILLE, FL 32	208				
FEI Number:	: 59-3657886	FEI Number Applied For ()	FEI Number Not App	icable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and	Address of I	New Registered Agent:	
PICKFORD, DONNIE L 9433 SUTEL DRIVE JACKSONVILLE, FL 32208 US			9433 GIBS	PICKFORD, DONNIE L 9433 GIBSON AVE JACKSONVILLE, FL 32208 US		
	named entity e of Florida.	submits this statement for the	purpose of changing i	ts registered o	office or registered agent, or both,	
SIGNATURE:				01/03/2005		
	Electro	nic Signature of Registered A	gent		Date	
Election Car	npaign Financir	ng Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	P (PICKFORD, D 9420 GIBSON JACKSONVILI	AVE	Title: Name: Address: City-St-Zip:	P (X PICKFORD, DO 9433 GIBSON JACKSONVILL	AVE	
Title: Name: Address: City-St-Zip:	VP (RIVERS, ROB 2724 W 25TH JACKSONVILI	ST	Title: Name: Address: City-St-Zip:	VP (X PIGFORD, JOH 300 S MYRTLE PERRY, FL 32	E ST	
Title: Name: Address: City-St-Zip:	CEO (PICKFORD, D 9420 GIBSDO JACKSONVILI	N AVE	Title: Name: Address: City-St-Zip:	CEO (X PICKFORD, DO 9433 GIBSDOI JACKSONVILL	N AVE	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Address:

City-St-Zip:

300 S MYRTLE ST

PERRY, FL 32347

SIGNATURE: DONNIE L PICKFORD CEO 01/03/2005