

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000095499

Entity Name: PHILCO CONSTRUCTION, INC.

FILED
Jan 19, 2009
Secretary of State

Current Principal Place of Business:

1020 N ORLANDO AV
STE 300
MAITLAND, FL 327514514

New Principal Place of Business:

Current Mailing Address:

1020 N ORLANDO AV
STE 300
MAITLAND, FL 327514514

New Mailing Address:

FEI Number: 59-3674968

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PHILLIPS, THOMAS B III
1020 N ORLANDO AV
STE 300
MAITLAND, FL 327514514 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: D () Delete
Name: PHILLIPS, THOMAS B III
Address: 525 TABATHA DR
City-St-Zip: OSTEEN, FL 327649310

Title: P () Delete
Name: STERN, ROBERT D
Address: 11 N LAKEVIEW DR
City-St-Zip: HAINES CITY, FL 338449453

Title: VP () Delete
Name: HEGERT, NATHAN K
Address: 2455 WORTHINGTON RD
City-St-Zip: MAITLAND, FL 327513655

Title: CFO (X) Delete
Name: THORNTON, STEPHEN W
Address: PO BOX 522223
City-St-Zip: LONGWOOD, FL 327522223

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: VALERIE DAVIDSON

M

01/19/2009

Electronic Signature of Signing Officer or Director

Date