

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 14, 2005 08:00 AM
Secretary of State

DOCUMENT # P00000100670

1. Entity Name
A C&C MCGRUFF BUILDERS, INC.



Principal Place of Business
353 E. FORSYTH ST.
JACKSONVILLE, FL 32202

Mailing Address
1504 EAST 13TH STREET
JACKSONVILLE, FL 32206



07122005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3690007

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

ALLEN, GLENN K
353 E. FORSYTH ST.
JACKSONVILLE, FL 32202

**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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstalling)

U000000372683
07/14/05-80002-015 150.00
DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	MCGRUFF, CURTIS
STREET ADDRESS	1504 E. 13TH ST.
CITY - ST - ZIP	JACKSONVILLE, FL 32206
TITLE	VP
NAME	MCGRUFF, CARLTON
STREET ADDRESS	1504 E. 13TH ST.
CITY - ST - ZIP	JACKSONVILLE, FL 32206
TITLE	S
NAME	MCGRUFF, MELISSA
STREET ADDRESS	1504 E. 13TH ST
CITY - ST - ZIP	JACKSONVILLE, FL 32206
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/12/05 (904) 358-0680

Date

Daytime Phone #