


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2006 08:00 AM
Secretary of State

| | |
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| DOCUMENT # P00000108638 1. Entity Name JOE NODA CONSTRUCTION, INC. |  |
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| Principal Place of Business 3791 WINTERHAWK COURT ST AUGUSTINE, FL 32086 | Mailing Address 3791 WINTERHAWK COURT ST AUGUSTINE, FL 32086 |
|--|--|

DO NOT WRITE IN THIS SPACE



04282006 No Chg-P CR2E034 (11/05)

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|---|--|
| 4. FEI Number 59-3676820 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

**O'CONNELL, HENRY
2200 N PONCE DE LEON BLVD STE 10
ST AUGUSTINE, FL 32084**

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
|---|---|

| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P NODA, JOSEPH A 3791 WINTERHAWK CT SAINT AUGUSTINE, FL 32086 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP NODA, BELINDA S 3791 WINTERHAWK CT SAINT AUGUSTINE, FL 32086 |
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1100000560463
05/18/06-80040-018 150.00

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: _____ **4/28/06** **904-797-382**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #