

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 23, 2007 08:00 AM
Secretary of State

DOCUMENT # P00536

1. Entity Name
CLEARSPAN COMPONENTS, INC.



Principal Place of Business
6110 OLD HIGHWAY 80 WEST
MERIDIAN, MS 39304-4195

Mailing Address
P.O. BOX 4195
MERIDIAN, MS 39304



04172007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
64-0673043

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

**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 reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME HOLLAND, DANIEL
STREET ADDRESS 6110 OLD HIGHWAY 80 WEST
CITY-ST-ZIP MERIDIAN, MS 39307

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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05/02/07-80071-007 150.00

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IN THIS SPACE**

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:

Daniel Holland (Daniel N. Holland)

4/17/07 601-483-3941

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #