## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000009471

Entity Name: WALLICK CONSTRUCTION, INC.

FILED Apr 06, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

187 E. CRYSTAL LAKE AVE. SUITE 1009 LAKE MARY, FL 32746

Current Mailing Address: New Mailing Address:

140 ESTATES CIRCLE
LAKE MARY, FL 32746

187 E. CRYSTAL LAKE AVE
SUITE 1009
LAKE MARY, FL 32746

FEI Number: 59-3702033 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WALLICK, BRUCE P

140 ESTATES CIRCLE

LAKE MARY, FL 32746 US

WALLICK, BRUCE P

187 E. CRYSTAL LAKE AVE.

SUITE 1009

LAKE MARY, FL 32746 US

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: 04/06/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP ( ) Delete Title: DP (X) Change ( ) Addition

 Name:
 WALLICK, BRUCE P
 Name:
 WALLICK, BRUCE P

 Address:
 140 ESTATES CIRCLE
 Address:
 187 E. CRYSTAL LAKE AVE #1009

City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: LAKE MARY, FL 32746

Title: DVST ( ) Delete Title: DVST (X) Change ( ) Addition

Name: WALLICK, EUGENIE L
Address: 140 ESTATES CIRCLE

 Address:
 140 ESTATES CIRCLE
 Address:
 187 E. CRYSTAL LAKE AVE. #1009

 City-St-Zip:
 LAKE MARY, FL 32746
 City-St-Zip:
 LAKE MARY, FL 32746

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.

SIGNATURE: BRUCE P. WALLICK P 04/06/2005