


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 24, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000023951 1. Entity Name ROPER CONSTRUCTION INC.	
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Principal Place of Business 1640 PINEDALE ROAD EDGEWATER, FL 32132	Mailing Address 1640 PINEDALE ROAD EDGEWATER, FL 32132
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02142006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3705964	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 ROPER, SIMON N 1640 PINEDALE ROAD EDGEWATER, FL 32132
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**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 _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P ROPER, SIMON 1640 PINEDALE ROAD EDGEWATER, FL 32132
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP ROPER, LAUREN 1640 PINEDALE ROAD EDGEWATER, FL 32132
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S ROPER, JOSHUA 1640 PINEDALE ROAD EDGEWATER, FL 32132
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T ROPER, DEVEN 1640 PINEDALE ROAD EDGEWATER, FL 32132
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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03/08/06 R0022 011 150.00

**DO NOT WRITE
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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2.20.2006 386-427-9159
Date Daytime Phone