## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000067017

Entity Name: T.L. HUNT CONSTRUCTION, INC.

FILED Feb 02, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

5008 WEST LINEBAUGH AVE STE 1 13301 W HILLSBOROUGH AVE.

TAMPA, FL 33624 TAMPA, FL 33635

Current Mailing Address: New Mailing Address:

5008 WEST LINEBAUGH AVE STE 1 13301 W HILLSBOROUGH AVE.

TAMPA, FL 33624 TAMPA, FL 33635

FEI Number: 59-3740368 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:

HUNT, TORRENCE L
5008 W LINEBAUGH AVE, STE 1
TAMPA, FL 33624 US
HUNT, TORRENCE L
13301 W HILLSBOROUGH AVE.
TAMPA, FL 33635 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: 02/02/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title:

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

Name: HUNT, TORRENCE L Name: HUNT, TORRENCE L

Address: 5008 W LINEBAUGH AVE, STE 1 Address: 13301 W HILLSBOROUGH AVE.

City-St-Zip: TAMPA, FL 33624 City-St-Zip: TAMPA, FL 33635

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad {\sf ( ) Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad {\sf (X) Change ( ) Addition}$ 

Name: FLEMING, H W Name: FLEMING, H W

Address: 5008 W LINEBAUGH AVE, STE 1 Address: 13301 W HILLSBOROUGH AVE.

City-St-Zip: TAMPA, FL 33624 City-St-Zip: TAMPA, FL 33635

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

Name: RAPP, LISA R Name: MARKS, SHERYL L

Address: 5008 W LINEBAUGH AVE, STE 1 Address: 13301 W HILLSBOROUGH AVE.

City-St-Zip: TAMPA, FL 33624 City-St-Zip: TAMPA, FL 33635

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: SHERYL L MARKS S 02/02/2009