2008 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 09, 2008 08:00 AN DOCUMENT # P01000117313 **Secretary of State** STRICKLAND CONSTRUCTION, INC. Principal Place of Business Mailing Address 1441 E. GARY RD 1441 E. GARY RD LAKELAND, FL 33801 LAKELAND, FL 33801 No Chg-P CR2E034 (11/05) 01042008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3760876 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 6. Name and Address of Current Registered Agent STRICKLAND, MICHAEL W DO NOT WRITE 3179 VALLEY VISTA CIR. LAKELAND, FL 33813 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE NAME STRICKLAND, MICHAEL W 3179 VALLEY VISTA CIRCLE STREET ADDRESS CITY-ST-ZIP LAKELAND, FL 33813 U00000776053 01/09/08-80009-006 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP

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: Michael W. Stelled - President

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1/4/08

863-683-8048

FILED

Daytime Phone ₩