FILED
Mar 10, 2008 8:00 am
Secretary of State
03-10-2008 90066 022 ***150.00

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000008298

1. Entity Name
BEVILL CONSTRUCTION CO.

Principal Place of Business	Mailing Address
15353 YELLOW BLUFF RD. JACKSONVILLE, FL 32226	15353 YELLOW BLUFF RD. JACKSONVILLE, FL 32226

40041955

01172008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
02-0563596
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

DURDEN, WILLIAM L ESQ.
225 WATER STREET, SUITE 900
JACKSONVILLE, FL 32202

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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 Michael W. Bevill 1/24/08
Signature, typed or printed name of registered agent and date if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	BEVILLE, MICHAEL W
STREET ADDRESS	15353 YELLOW BLUFF RD.
CITY-ST-ZIP	JACKSONVILLE, FL 32226
TITLE	VPD
NAME	BEVILLE, WALLACE S
STREET ADDRESS	15353 YELLOW BLUFF RD.
CITY-ST-ZIP	JACKSONVILLE, FL 32226
TITLE	D
NAME	BEVILL, TIFFANY E
STREET ADDRESS	15353 YELLOW BLUFF RD
CITY ST-ZIP	JACKSONVILLE, FL
TITLE	D.
NAME	BEVILLE, JOYCE E
STREET ADDRESS	15353 YELLOW BLUFF RD
CITY ST-ZIP	JACKSONVILLE, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Tiffany E. Bevill Tiffany E. Bevill 1/24/08 888-0430904
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #