## 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Apr 10, 2007 08:00 Al Secretary of State DOCUMENT # P02000024934 1. Entity Name YATES CONTRACTING, INC. Principal Place of Business Mailing Address PO BOX 636 VERNON FL 32462 2540 BRYANT BAY RD VERNON FL 32462 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) 4. FEI Number Applied For 59-3084196 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered A 7. Name and Address of New Registered Agent Name YATES, DALE 2540 BRYANT BAY RD Street Address (P.O. Box Number is Not Acceptable) VERNON FL 32462 City Zip Code FI 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 Signature, typed or printed hame of registered agent and title it applicable (NOTE: Registered Againt signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete DHE Change Addition H00000698043 YATES, DALE NAMI NAMI 04/18/07-80064-021 150.00 **PO BOX 636** SURFEI ADDRESS SIDLET ADDRESS VERNON FL 32462 CITY - ST-ZIP CHY-ST-ZIP VΡ HILE ☐ Delete Change ☐ Addition YATES, DOUG NAME 2455 BRYANT BAY RD. STRUET ADDRESS STREET ADDRESS CARYVILLE FL 32427 CHY-SI-7IP CHY-ST-ZIP HICE ☐ Delete -MILE Change ■ Addition NAME NAMU STREET ADDRESS STREET ADDRESS CHY-SI-7IP CITY-ST-7/P THRE ☐ Delete 1001 ☐ Change Addition NAME NAMI STREET ADDRESS SH# ET ADDRESS CITY-ST-ZIP CHY-ST-ZIP THE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-SE-ZIP CUY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAMO NAME. STREET ADDRESS STRUET ADDRESS CITY-S1-ZIP CHY-SI-ZIP 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information

FILED

SIGNATURE: \_\_\_\_\_\_ (DALE YATES) 4-1-07 850-258-1304

if changed, or on an attachment with an address, with all other like empowered.

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