2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000062013

HUNT, CHERYL

DADE CITY, FL 33523

15903 US 301

Name:

Address:

City-St-Zip:

Entity Name: W & R CONSTRUCTION SERVICES, INC.

FILED Jul 08, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
15903 US 301 DADE CITY, FL 33523			1523 MAYPOP ST. ZEPHYRHILLS, FL 33	1523 MAYPOP ST. ZEPHYRHILLS, FL 33540	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
PO BOX 315 ZEPHYRHILLS, FL 33539			1523 MAYPOP ST. ZEPHYRHILLS, FL 33540		
FEI Number	: 04-3677477	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
The above	OR 33145 US	bmits this statement for the	purpose of changing its registere	ed office or registered agent, or both,	
SIGNATU					
Electronic Signature of Registered Agen			ent	Date	
		2)(b), F.S., the corporation did n Trust Fund Contribution (X).	ot receive the prior notice.		
OFFICER	S AND DIRECT	ORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD () E HUNT, ROGER L 15903 US 301 DADE CITY, FL	Delete 33523	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () E KELLEY, WILLIA 1524 MAYPOP S ZEPHYRHILLS, F	Т.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () E BARRERA, JODY 1524 MAYPOP S ZEPHYRHILLS, F	Т	Title: Name: Address: City-St-Zip:	() Change () Addition	
)elete	Title	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JODY L. BARRERA S 07/08/2008