


2006 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED

Jan 12, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000065650 1. Entity Name LATITUDE 28 CONSTRUCTION, INC.	
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Principal Place of Business 2432 S OLYMPIC HILLS TERRACE INVERNESS, FL 34450	Mailing Address PO BOX 1869 INVERNESS, FL 34450
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DO NOT WRITE IN THIS SPACE



01062006 No Chg-P CR2E034 (11/05)

4. FEI Number 30-0109568	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ENSTROM, TIM D
2432 S OLYMPIC HILLS TERRACE
INVERNESS, FL 34450

DO NOT WRITE 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: _____ (NOTE: Registered Agent signature required when reinstating)
Signature, typed or printed name of registered agent and title if applicable
U000000382686
01/12/06-80024-009 150.00
DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ENSTROM, TIM D 9848 E TRYON CT INVERNESS, FL 34450
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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: Tim Enstrom
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
11/11/06 3527266049
Date Daytime Phone #