

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2006 8:00 am
Secretary of State

04-20-2006 90212 023 ***150.00

DOCUMENT # P02000071533

1. Entity Name
D & R BUILDING & REMODELING INC



Principal Place of Business
**2800 S. NOVA ROAD
UNIT C9
SOUTH DAYTONA, FL 32119**

Mailing Address
**2800 S. NOVA ROAD
UNIT C9
SOUTH DAYTONA, FL 32119**

50014020



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04182006

Chg-P

CR2E034 (11/05)

4. FEI Number

01-0725272

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**FORQUER, RICHARD A
1222 TRACY DR.
PORT ORANGE, FL 32129**

7. Name and Address of New Registered Agent

Name **Richard A. Forquer**
Street Address (P.O. Box Number is Not Acceptable)
35 Mayfield Cir
City **Ormond Beach** FL Zip Code **32174**

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 **RICHARD A FORQUER PRESIDENT** DATE **APR 18, 2006**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **P** ☒ Delete
NAME **FORQUER, JOANNA**
STREET ADDRESS **1222 TRACY DR.**
CITY-ST-ZIP **PORT ORANGE, FL 32129**

TITLE **V** ☐ Delete
NAME **FORQUER, RICHARD A**
STREET ADDRESS **35 MAYFIELD CIR.**
CITY-ST-ZIP **ORMOND BEACH, FL 32174**

TITLE **T** ☐ Delete
NAME **MILLER, JOHN E JR**
STREET ADDRESS **350 WATER OAK LANE**
CITY-ST-ZIP **ORMOND BEACH, FL 32174**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Change ☐ Addition
NAME **FORQUER, RICHARD A.**
STREET ADDRESS **35 MAYFIELD CIR.**
CITY-ST-ZIP **ORMOND BEACH, FL 32174**

TITLE **V** ☒ Change ☐ Addition
NAME **MILLER, JOHN E JR**
STREET ADDRESS **350 WATER OAK LN**
CITY-ST-ZIP **ORMOND BEACH, FL 32174**

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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: **Richard A Forquer** 4/18/06 386-527-1703
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #