## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000076243

Entity Name: HOYT CONSTRUCTION, INC.

**FILED** Apr 30, 2005 Secretary of State

20 RADVLIFFE DR. 29 WYNNFIELD DR PALM COAST, FL 32164 PALM COAST, FL 32164

**Current Mailing Address: New Mailing Address:** 

20 RADVLIFFE DR. 29 WYNNFIELD DR PALM COAST, FL 32164 PALM COAST, FL 32164

FEI Number: 55-0793592 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

COLEMAN, FOSTER H COLEMAN, FOSTER H 20 RADCLÍFFE DR. 29 WYNNFIELD DR PALM COAST, FL 32164 US PALM COAST, FL 32164

US

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.

SIGNATURE: 04/30/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition COLEMAN, FOSTER H COLEMAN, FOSTER H Name: Name:

20 RADCLIFFE DR. 29 WYNNFIELD DR Address: Address: City-St-Zip: PALM COAST, FL 32164 City-St-Zip: PALM COAST, FL 32164

Title: Title: () Change () Addition () Delete Name: COLEMAN, FOSTER H Name:

20 RADCLIFFE DR. Address: Address: PALM COAST, FL 32164 City-St-Zip: City-St-Zip:

( ) Delete Title: Title: VΡ VΡ (X) Change ( ) Addition

COLEMAN, RYAN Name: COLEMAN, RYAN Name: 20 RADCLIFFE DR. 29 WYNNFIELD DR Address: Address: City-St-Zip: PALM COAST, FL 32164 City-St-Zip: PALM COAST, FL 32164

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: YOLANDAPAGANO 04/30/2005 MS