


FILED
Mar 17, 2005 08:00 AM
Secretary of State

**2005 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P02000091920 1. Entity Name R. A. COLSON GENERAL CONTRACTOR, INC.	
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Principal Place of Business 7840 SE 64TH ST NEWBERRY, FL 32669	Mailing Address 7840 SE 64TH ST NEWBERRY, FL 32669
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03142005 No Chg-P CR2EQ34 (1Q/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 45-0485413	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**COLSON, RANDY A
 7840 SE 64TH ST
 NEWBERRY, FL 32669**

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 _____ DATE _____
(SIGNER: typed or printed name of registered agent and title if applicable) (DATE: Registered Agent signature required when re-registering)

**FILE NOW! FEE IS \$150.00
 After May 1, 2005 Fee will be \$650.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE	PT
NAME	COLSON, RANDY A
STREET ADDRESS	7840 SE 64TH ST
CITY-ST-ZIP	NEWBERRY, FL 32669
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 03/17/05-80011-023 158.75

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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: Randy A. Colson **3-14-05** **352-944-1450**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR