

**FILED**  
**Apr 02, 2007 08:00 AM**  
**Secretary of State**

1. Entity Name  
CBM CONSTRUCTION, INC.



POB 1077  
SORRENTO, FL 32776



4. FEI Number  
20-0116171

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

MILLER, WILLIAM E  
35620 E LAKE SENECA RD  
EUSTIS, FL 32736

**DO NOT WRITE  
IN THIS SPACE**

SIGNATURE.

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**9. Election Campaign Financing Trust Fund Contribution.**

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

TITLE	D
NAME	MILLER, WILLIAM E
STREET ADDRESS	P.O.BOX 1077
CITY-ST-ZIP	SORRENTO, FL 32776

TITLE  
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CITY-ST-ZIP

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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 ~~the~~ empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date \_\_\_\_\_

Daytime Phone #