

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000001771

FILED  
Jul 06, 2007  
Secretary of State

Entity Name: DEVORE & ASSOCIATES CONSTRUCTION SERVICES, INC.

## Current Principal Place of Business:

180 SOUTH RONALD REAGAN BLVD.  
SUITE 104  
LONGWOOD, FL 32750 US

## New Principal Place of Business:

## Current Mailing Address:

180 SOUTH RONALD REAGAN BLVD.  
SUITE 104  
LONGWOOD, FL 32750 US

## New Mailing Address:

274 KIPLING COURT  
HEATHROW, FL 32746 US

FEI Number: 36-4520782

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ALPER, JONATHAN B  
274 KIPLING COURT  
HEATHROW, FL 32750 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: DEVORE, RONDA  
Address: 180 SOUTH RONALD REAGAN BLVD., SUITE 104  
City-St-Zip: LONGWOOD, FL 32750 US

Title: SD (X) Delete  
Name: ROBERTS, ROBERT  
Address: 180 SOUTH RONALD REAGAN BLVD., STE 104  
City-St-Zip: LONGWOOD, FL 32750 SE

Title: VPD ( ) Delete  
Name: MOGUL, THOMAS  
Address: 180 S. RONALD REAGAN BLVD. STE 104  
City-St-Zip: LONGWOOD, FL 32750 SE

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: DEVORE, RONDA  
Address: 7014 LEESVILLE BLVD104  
City-St-Zip: SPRINGFIELD, VA 22151 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: JONATHAN ALPER

ATTY

07/06/2007

Electronic Signature of Signing Officer or Director

Date