

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**

**Apr 14, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P03000031745**

1. Entity Name

R.C. CONSTRUCTION & TRUCKING, INC.



Principal Place of Business

5365 MONTERREY ROAD  
CRESTVIEW, FL 32539

Mailing Address

5365 MONTERREY ROAD  
CRESTVIEW, FL 32539



04112006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

57-1157459

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

CHRISTMAS, LISA  
3197 SAPP RD.  
COTTONDALE, FL 32431

**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

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

(NOTE: Registered agent signature required when reissuing)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE D  
NAME CHRISTMAS, RANDALL  
STREET ADDRESS 5365 MONTERREY ROAD  
CITY-ST-ZIP CRESTVIEW, FL 32539

TITLE D  
NAME CHRISTMAS, LISA  
STREET ADDRESS 5365 MONTERREY ROAD  
CITY-ST-ZIP CRESTVIEW, FL 32539

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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STREET ADDRESS  
CITY-ST-ZIP

U00000510582  
04/29/06-80014-001 150.00

**DO NOT WRITE  
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/06 850-423-9718  
Date Daytime Phone #