

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 14, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000040264

1. Entity Name
SOUTHERN TIES CONSTRUCTION, INC.



Principal Place of Business
1671 EAGLE'S NEST LANE
MIDDLEBURG, FL 32068

Mailing Address
1671 EAGLE'S NEST LANE
MIDDLEBURG, FL 32068



01062006 No Chg-P CRZE034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
42-1585335

Applied For
Not Applicable

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

5. Name and Address of Current Registered Agent

HERRINGTON, LINDA
1671 EAGLE'S NEST LANE
MIDDLEBURG, FL 32068

**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 *Linda Herrington*

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

LINDA HERRINGTON

(NOTE: Registered Agent signature required when reinstating)

2/14/06

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.

☐ **\$5.00 May Be**
Added to Fees

U00000133946
02/24/06-80039-005 150.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HERRINGTON, DREXEL
6907 WEST DEVER ST
JACKSONVILLE, FL 32254

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
HERRINGTON, CURTIS
1671 EAGLE NEST LANE
MIDDLEBURG, FL 32068

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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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

Curtis Herrington *Curtis Herrington*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-11-06

Date

(904) 5796089

Daytime Phone #