

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2006 8:00 am
Secretary of State

03-30-2006 90023 028 ***150.00

DOCUMENT # P03000072727

1. Entity Name
CSS BUILDERS, INC.



Principal Place of Business

130 43RD AVENUE
VERO BEACH, FL 32968
1116 7th Place
VERO BEACH, FL 32962

Mailing Address

130 43RD AVENUE
VERO BEACH, FL 32968
1116 7th Place
VERO BEACH, FL 32962

60022847



03102006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
14-1888073

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

PRENDERGAST, RICHARD L
130 43RD AVENUE
VERO BEACH, FL 32968

**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 reinstating)

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

10. OFFICERS AND DIRECTORS

TITLE **D**
NAME **THOMAS, CHRISTOPHER D**
STREET ADDRESS **130 43RD AVENUE**
CITY - ST - ZIP **VERO BEACH, FL 32968**
1116 7th Place
VERO BEACH FL 32962

TITLE **D**
NAME **LEWIS, SHELDON D**
STREET ADDRESS **430 43RD AVENUE**
CITY - ST - ZIP **VERO BEACH, FL 32968**
4007 US#1
32960

TITLE **D**
NAME **HAGERMAN, STEVEN**
STREET ADDRESS **430 43RD AVENUE**
CITY - ST - ZIP **VERO BEACH, FL 32968**
1322 Dewitt Lane
Sebastian, FL 32958

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-10-06
Date

772-978-7723
Daytime Phone #