


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 24, 2005 8:00 am
Secretary of State

07-19-2005 90039 047 ***150.00
08-24-2005 90055 021 ***400.00

DOCUMENT # P03000094599 1. Entity Name H & R CONSTRUCTION OF CENTRAL FLORIDA, INC.	
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Principal Place of Business 406 MALTA RD ORLANDO, FL 32828	Mailing Address 406 MALTA RD ORLANDO, FL 32828
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50063130



07112005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 42-1603839	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent LEFKOWITZ, IVAN M 430 N MILLS AVE ORLANDO, FL 32803	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST RITTER, HOWARD President 406 MALTA RD ORLANDO, FL 32828
TITLE NAME STREET ADDRESS CITY-ST-ZIP	James Thorp Secretary 625 W. 1st Ave. Orlando, FL 32805
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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 exemption stated in Section 119.07(3)(i), 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:  **7-13-05** **402-947-5362**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #