

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 30, 2007 8:00 am
Secretary of State

03-30-2007 90126 025 ***150.00

DOCUMENT # P03000107643

1. Entity Name

JORMAC CONSTRUCTION, INC.



Principal Place of Business

6701 MALLARD'S COVE ROAD
#39-G
JUPITER FL 33458

Mailing Address

6701 MALLARD'S COVE ROAD
#39-G
JUPITER FL 33458



2. Principal Place of Business - No P.O. Box #

6701 Mallards cove rd

3. Mailing Address

6701 Mallards cove rd

Suite, Apt. #, etc.

39 G

Suite, Apt. #, etc.

39 G

City & State

Jupiter FL

City & State

Jupiter, FL

Zip

33458

Country USA

W. Palm

Zip

33458

Country USA

W. Palm

1st MOORE

CR2E034 (10/06)

4. FEI Number 90-0113180

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JORDAN, CLARENCE E
6701 MALLARD'S COVE ROAD
#39-G
JUPITER FL 33458

7. Name and Address of New Registered Agent

Name

Clarence Jordan

Street Address (P.O. Box Number is Not Acceptable)

6701 Mallards cove rd

#39 G

City

Jupiter

FL

Zip Code

33458

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

Clarence Jordan

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

(NOTE: Registered Agent signature required when transferring)

DATE

03/18/07

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME JORDAN, CLARENCE E
STREET ADDRESS 6701 MALLARD'S COVE ROAD
CITY ST ZIP JUPITER FL 33458 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY ST ZIP ☐ Delete

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CITY ST ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY ST ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP ☐ Change ☐ Addition

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NAME
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CITY ST ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Clarence Jordan

clarence Jordan

03/18/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #