## 2007 FOR PROFIT CORPORATION

## **FILED** ANNUAL REPORT Apr 27, 2007 08:00 Al Secretary of State DOCUMENT # P03000109979 COLLEEN CRAIG DESIGN BUILD, INC. Mailing Address Principal Place of Business 11609 PAINTED HILLS LANE 11609 PAINTED HILLS LANE TAMPA, FL 33624 TAMPA, FL 33624 No Chg-P CR2E034 (11/05) 04182007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0289393 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GJERSWALD, JEFFERY C DO NOT WRITE 11609 PAINTED HILLS LANE TAMPA, FL 33624 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, typed or printed name of registered agent and title if applicable (NOTE; Registered Agent signature required when reinstating) . 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \$5.00, May Be . Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME GJERSWALD, JEFFERY C 11609 PAINTED HILLS LANE STREET ADDRESS TAMPA, FL 33624 CITY-ST-7IP U000000740151 TITLE 05/14/07-80055-021 150.0d NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CJTY-ST-ZJP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP

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:** 

TITLE

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS