2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000110816

Entity Name: POWELL CONSTRUCTION & TRIM, INC.

BIRDSONG, JEREMY W

571 WOODLAND BAYOU DRIVE

SANTA ROSA BEACH, FL 32459

Name:

Address: City-St-Zip: FILED Apr 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 571 WOODLAND BAYOU DRIVE SANTA ROSA BEACH, FL 32459 **Current Mailing Address: New Mailing Address:** 571 WOODLAND BAYOU DRIVE SANTA ROSA BEACH, FL 32459 FEI Number: 59-3287646 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LOOMAN, POWELL G 571 WOODLAND BAYOU DRIVE SANTA ROSA BEACH, FL 32459 US 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition LOOMAN, POWELL G Name: Name: 571 WOODLAND BAYOU DRIVE Address: Address: City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip: Title: Title: () Delete () Change () Addition Name: LOOMAN, DEBORAH H Name: 571 WOODLAND BAYOU DRIVE Address: Address: SANTA ROSA BEACH, FL 32459 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: POWELL G LOOMAN PRES 04/14/2009