2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P03000114564

1. Entity Name

MICHAEL P STEPP GENERAL CONTRACTOR INC



FILED Feb 01, 2006 08:00 AN **Secretary of State**

Fee Required

Principal Place of Business

Mailing Address

295 N.E. 100TH STREET OCALA, FL 34479

295 N.E. 100TH STREET OCALA, FL 34479



DO NOT WRITE IN THIS SPACE

CR2E034 (11/05) 01262006 No Chg-P 4. FEI Number Applied For

52-2404054 Not Applicable \$8.75 Additional 5. Certificate of Status Desired

6. Name and Address of Current Registered Agent

STEPP, MICHAEL P 295 N.E. 100TH STREET OCALA, FL 34479

DO NOT WRITE IN THIS SPACE

the obligati	named entity submits this statement for the pons of registered agent.	urpose of changing its register	ed office or i	registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typad or printed name of registered agent and title i	l applicable (NOTE, Registere	d Agent signatur	e required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 by 1, 2006 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.	ncing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			1
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STEPP, MICHAEL P 295 N.E. 100TH STREET OCALA, FL 34479				
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				-	
TITLE NAME STREET ADDRESS					

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. MICHAUL

TED NAME OF SIGNING OFFICER OR DIRECTOR