

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 25, 2008 08:00 AM
Secretary of State

DOCUMENT # P03000126806

1. Entity Name
INLAND CONSTRUCTION, INC.



Principal Place of Business

8985 STAR TULIP CT
NAPLES, FL 34113

Mailing Address

8985 STAR TULIP CT
NAPLES, FL 34113



04222008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0367641

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HOGGATT, MICHAEL R
8985 STAR TULIP CT
NAPLES, FL 34113

**DO NOT WRITE
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

Michael R. Hoggatt

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

(NOTE: Registered Agent signature required when reinstating)

4-20-08

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

UD00000922342
05/15/08-80042-024 150.00

10. OFFICERS AND DIRECTORS

TITLE	PS
NAME	HOGGATT, MICHAEL R
STREET ADDRESS	8985 STAR TULIP CT
CITY-ST-ZIP	NAPLES, FL 34113
TITLE	VP
NAME	HOGGATT, MARGARET A
STREET ADDRESS	8985 STAR TULIP CT
CITY-ST-ZIP	NAPLES, FL 34113
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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 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:

Michael R. Hoggatt

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-20-08

DATE

239 272-2211

DAYTIME PHONE #