

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

1/20

FILED
Feb 17, 2005 8:00 am
Secretary of State

01-20-2005 90019 006 ***150.00

DOCUMENT # P03000128365 1. Entry Name H & D ROBERTSON CONSTRUCTION COMPANY, INCORPORATED							
Principal Place of Business 42 LAKE ARROWHEAD DR WINTER HAVEN, FL 33880		Mailing Address 42 LAKE ARROWHEAD DR WINTER HAVEN, FL 33880					
DO NOT WRITE IN THIS SPACE		66002175  01112005 No Chg-P CR2E034 (10/03) <table border="1" style="width:100%; border-collapse: collapse; font-size: 8px;"> <tr> <td style="width: 70%;">4. FEI Number 86-1086990</td> <td style="width: 30%;">Applied For ☐ Not Applicable</td> </tr> <tr> <td colspan="2">5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required</td> </tr> </table>		4. FEI Number 86-1086990	Applied For ☐ Not Applicable	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
4. FEI Number 86-1086990	Applied For ☐ Not Applicable						
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required							
6. Name and Address of Current Registered Agent HERMAN, CHARLES ESQ 42 LAKE ARROWHEAD DR WINTER HAVEN, FL 33880		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 <u>Charles Herman Robertson</u> 1-13-05 Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when resigning.)							
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS							
TITLE	NAME	DO NOT WRITE IN THIS SPACE					
STREET ADDRESS	ROBERTSON, CHARLES H						
CITY - ST - ZIP	42 LAKE ARROWHEAD DR WINTER HAVEN, FL 33880						
TITLE	V						
NAME	ROBERTSON, HERMAN D						
STREET ADDRESS	42 LAKE ARROWHEAD DR WINTER HAVEN, FL 33880						
CITY - ST - ZIP	WINTER HAVEN, FL 33880						
TITLE	NAME						
STREET ADDRESS	STREET ADDRESS						
CITY - ST - ZIP	CITY - ST - ZIP						
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <u>Charles Herman Robertson</u>		2-14-05 (863) 967-5273					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #					

Charles Herman Robertson