

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 04, 2007 08:00 AM
Secretary of State

DOCUMENT # P03000130172

1. Entity Name
**RANDALL SHULER'S PROFESSIONAL CONSTRUCTION
SERVICES, INC.**



Principal Place of Business

**7450 EAST IRLO BRONSON MEMORIAL HWY
ST CLOUD, FL 34771**

Mailing Address

**7450 EAST IRLO BRONSON MEMORIAL HWY
ST CLOUD, FL 34771**



01082007 No Chg-P CR2E034 (11/05)

4. FEI Number
55-0852183

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**SHULER, RANDALL A
7450 EAST IRLO BRONSON MEMORIAL HWY
ST CLOUD, FL 34771**

**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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**U000000690554
04/11/07-80079-015 150.00**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME SHULER, RANDALL A
STREET ADDRESS 7450 EAST IRLO BRONSON MEMORIAL HWY
CITY-ST-ZIP ST CLOUD, FL 34771

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CITY-ST-ZIP

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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:

Randall A Shuler
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/9/07