

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000130269

FILED  
Apr 30, 2007  
Secretary of State

Entity Name: BRYCE CONTRACTING OF SO.FL, INC

## Current Principal Place of Business:

2301 SUNRISE BLVD  
FORT MYERS, FL 33907 US

## New Principal Place of Business:

216 AURORA AVE S.  
LEHIGH ACRES, FL 33936 US

## Current Mailing Address:

2301 SUNRISE BLVD  
FORT MYERS, FL 33907 US

## New Mailing Address:

PO BOX 447  
LEHIGH ACRES, FL 33970 US

FEI Number: 20-0377960

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SOUTHWEST PROFESSIONAL SERVICES OF SO FL I  
13571 MCGREGOR BLVD  
22  
FORT MYERS, FL 33919 US

## Name and Address of New Registered Agent:

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:

Title: P,D ( ) Delete  
Name: BRYCE, STEPHEN M  
Address: 2301 SUNRISE BLVD  
City-St-Zip: FORT MYERS, FL 33907 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,D (X) Change ( ) Addition  
Name: BRYCE, STEPHEN M  
Address: 216 AURORA AVE S.  
City-St-Zip: LEHIGH ACRES, FL 33936 US

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.

SIGNATURE: STEPHEN M BRYCE

P,D

04/30/2007

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date