


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jan 31, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P03000137690</b> 1. Entity Name <b>HENDRICKS PAVING, INC.</b>					
Principal Place of Business <b>19721 NW 62ND AVE. ALACHUA FL 32615</b>			Mailing Address <b>19721 NW 62ND AVE. ALACHUA FL 32615</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt #, etc.		Suite, Apt #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number <b>56-2416897</b>			Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			<b>\$8.75 Additional Fee Required</b>		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>HENDRICKS, RICHARD H 19721 BW 62ND AVE. ALACHUA FL 32615</b>			Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee Will Be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D</b> <b>HENDRICKS, RICHARD H</b> <b>19721 BW 62ND AVE.</b> <b>ALACHUA FL 32615</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D</b> <b>HENDRICKS, DEBORAH L</b> <b>19721 BW 62ND AVE.</b> <b>ALACHUA FL 32615</b>	<input type="checkbox"/> Delete			
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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><i>Richard Hendricks</i></u> <b>RICHARD HENDRICKS PRES</b> 1/28/05 352 472-6542					



1st MOORE CR2E034 (10/04)

4. FEI Number **56-2416897**

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HENDRICKS, RICHARD H  
19721 BW 62ND AVE.  
ALACHUA FL 32615**

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

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**After May 1, 2005 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

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☐ Change ☐ Addition

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STREET ADDRESS  
CITY - ST - ZIP  
**D**  
**HENDRICKS, DEBORAH L**  
**19721 BW 62ND AVE.**  
**ALACHUA FL 32615**

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SIGNATURE: *Richard Hendricks* **RICHARD HENDRICKS PRES** 1/28/05 352 472-6542